

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735108

**Entity Name:** CARRIAGE VILLAGE LANDOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5451 BAYSHORE ROAD  
NORTH FORT MYERS, FL 33917

**Current Mailing Address:**

5451 BAYSHORE ROAD  
NORTH FORT MYERS, FL 33917 US

**FEI Number: 59-1916766**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, PA  
12140 CARISSA COMMERCE COURT  
SUITE 200  
FORT MYERS, FL 33912 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HENDERSON, ROBERT  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            SECRETARY  
Name            SHANK, MAUREEN  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            TREASURER  
Name            PHEND, JIM  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            DIRECTOR, ROADS & DRAINS, 1ST  
VICE PRESIDENT  
Name            BENEDICT, MICHAEL  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            DIRECTOR, POOL  
Name            JACQUES, LARRY  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            DIRECTOR, TREASURER  
Name            PHEND, JIM  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            DIRECTOR, REFUSE  
Name            SMITH, ANGELA  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

Title            DIRECTOR, GROUNDS & BUILDING,  
2ND VICE PRESIDENT  
Name            MCGOUGH, PATRICK  
Address        5451 BAYSHORE ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBERT HENDERSON**

**PRESIDENT**

**01/28/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR, CLUBHOUSE  
Name            ROBBINS, ANNIE  
Address        5451 BAYSHORE RD.  
City-State-Zip: N FORT MYERS FL 33917