

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

DOCUMENT# 741107

**Entity Name:** DRIFTWOOD CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1345 MEDITERRANEAN DR.  
PUNTA GORDA, FL 33950**Current Mailing Address:**100 SULLIVAN ST., STE 112  
PUNTA GORDA, FL 33950 US**FEI Number:** 59-2606141**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GREENE, JOAN  
100 SULLIVAN ST., STE 112  
PUNTA GORDA, FL 33950 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	STD
Name	OWENS , DAVID
Address	100 SULLIVAN ST., STE 112
City-State-Zip:	PUNTA GORDA FL 33950

Title	PD
Name	PATTERSON, MICHAEL
Address	100 SULLIVAN ST., STE 112
City-State-Zip:	PUNTA GORDA FL 33950

Title	VPD
Name	MAC DOUGAL, DAVID J JR.
Address	100 SULLIVAN ST., STE 112
City-State-Zip:	PUNTA GORDA FL 33950

Title	D
Name	SCHELL, TOM
Address	100 SULLIVAN ST., STE 112
City-State-Zip:	PUNTA GORDA FL 33950

Title	D
Name	HENDERSON, CHRIS
Address	100 SULLIVAN ST., STE 112
City-State-Zip:	PUNTA GORDA FL 33950

*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: MICHAEL PATTERSON****PRESIDENT****02/21/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date