

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

DOCUMENT# 742229

**Entity Name:** TENNIS VILLAS ASSOCIATION, INC.**Current Principal Place of Business:**625 SE CENTRAL PARKWAY  
STUART, FL 34994**Current Mailing Address:**625 SE CENTRAL PARKWAY  
STUART, FL 34994 US**FEI Number:** 59-1907801**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PLANTATION MANAGEMENT COMPANY  
625 SE CENTRAL PARKWAY  
STUART, FL 34994 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:** TIMOTHY KAZMIER

04/21/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VPD
Name	HARVEY, LES
Address	504 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996

Title	DIRECTOR
Name	EVANS, SANDY
Address	534 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996

Title	TREASURER, DIRECTOR
Name	EMMERICH, IRINA
Address	554 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996

Title	SD
Name	POST, GEORGIA
Address	554 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996

Title	PRESIDENT, DIRECTOR
Name	MARTIN , RUTH
Address	544 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996

Title	MANAGER
Name	KAZMIER, TIMOTHY D.
Address	625 SE CENTRAL PARKWAY
City-State-Zip:	STUART FL 34994

*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:** TIMOTHY D. KAZMIER**MANAGER**

04/21/2021

Electronic Signature of Signing Officer/Director Detail

Date