

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Jan 09, 2018
Secretary of State
CC3106045903

Entity Name: PIEDMONT "G" ASSOCIATION, INC.

Current Principal Place of Business:

C/O WILSON LANDSCAPING AND MANAGEMENT CORP
1300 NW 17TH AVE SUITE 270
DELRAY BEACH, FL 33445

Current Mailing Address:

C/O WILSON LANDSCAPING AND MANAGEMENT CORP
1300 NW 17TH AVE SUITE 270
DELRAY BEACH, FL 33445 US

FEI Number: 59-2029123

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DANNY
C/O WILSON LANDSCAPING AND MANAGEMENT CORP
1300 NW 17TH AVE SUITE 270
DELRAY BEACH, FL 33445 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	P	Title	T
Name	POLLACK, JOAN	Name	STEIGLITZ, ANNE
Address	C/O WILSON LANDSCAPING AND MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	Address	C/O WILSON LANDSCAPING AND MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270
City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445
Title	D	Title	DIRECTOR
Name	COHEN, ELAINE	Name	ELAINE, SCHWARTZ
Address	C/O WILSON LANDSCAPING AND MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	Address	C/O WILSON LANDSCAPING AND MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270
City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445
Title	VICE-PRESIDENT	Title	SECRETARY
Name	BENNIN, ARLENE	Name	SUZANN, HELENE
Address	C/O WILSON LANDSCAPING AND MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	Address	C/O WILSON LANDSCAPING AND MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270
City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445

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: JOAN POLLACK

PRESIDENT

01/09/2018

Electronic Signature of Signing Officer/Director Detail

Date