## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749489** 

Entity Name: PIEDMONT "L" 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: 59-2039756 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DANNY L 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:

City-State-Zip:

Date Electronic Signature of Registered Agent

MANAGEMENT CORP

**FILED** Jan 04, 2023

Secretary of State

0023387675CC

Officer/Director Detail:

Title **PRESIDENT** Title VICE-PRESIDENT Name RICHMAN, LINDA Name POWERS, JOHN

C/O WILSON LANDSCAPING AND C/O WILSON LANDSCAPING AND Address Address

MANAGEMENT CORP

1300 NW 17TH AVE SUITE 270 1300 NW 17TH AVE SUITE 270

DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 City-State-Zip:

**DIRECTOR** Title Title DIRECTOR

UNGER, BRUCE HANKE, ERIKA Name Name

C/O WILSON LANDSCAPING AND C/O WILSON LANDSCAPING AND Address Address

MANAGEMENT CORP MANAGEMENT CORP

1300 NW 17TH AVE SUITE 270 1300 NW 17TH AVE SUITE 270

DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip:

Title **DIRECTOR** Title **TREASURER** Name BELKIND, PETER Name WILSON, JACKIE

C/O WILSON LANDSCAPING AND C/O WILSON LANDSCAPING AND Address Address MANAGEMENT CORP MANAGEMENT CORP

> 1300 NW 17TH AVE SUITE 270 1300 NW 17TH AVE SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title SECRETARY BROWN, KAREN Name

Address C/O WILSON LANDSCAPING AND

MANAGEMENT CORP

1300 NW 17TH AVE SUITE 270

DELRAY BEACH FL 33445 City-State-Zip:

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.

01/04/2023 SIGNATURE: LINDA RICHMAN PRESIDENT