

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751525

**Entity Name:** PRADERA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**Current Mailing Address:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**FEI Number:** 59-2154960

**Certificate of Status Desired:** Yes

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

GAGLIANO, KAREN ESQ.  
955 N NW 17 AVENUE  
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 D  
Name FORD, RON  
Address 21381 SONESTA WAY  
City-State-Zip: BOCA RATON FL 33433

Title D  
Name FULTS, TOM  
Address 21545 CAMPO ALLEGRO  
City-State-Zip: BOCA RATON FL 33433

Title P  
Name GELHARDT, HERB  
Address 21362 PLACIDA TERRACE  
City-State-Zip: BOCA RATON FL 33433

Title T  
Name GRIFEL, BARBARA  
Address 21403 CAMPO ALLEGRO DR.  
City-State-Zip: BOCA RATON FL 33433

Title VP  
Name MASH, STEVEN  
Address 21530 LAGUANA DR  
City-State-Zip: BOCA RATON FL 33433

Title S  
Name AN, AMY  
Address 21515 LAGUNA DRIVE  
City-State-Zip: BOCA RATON FL 33433

Title D  
Name FOLGATE, RANDALL  
Address 21520 CAMPO ALLEGRE DR.  
City-State-Zip: BOCA RATON FL 33433

*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:** HERB GELHARDT

**PRESIDENT**

**04/21/2013**

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

\_\_\_\_\_  
Date