

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751525

Entity Name: PRADERA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**790 PARK OF COMMERCE BLVD
SUITE 200
BOCA RATON, FL 33487**Current Mailing Address:**790 PARK OF COMMERCE BLVD
SUITE 200
BOCA RATON, FL 33487 US**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 SECRETARY
Name AN, AMY
Address 21515 LAGUNA DRIVE
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR
Name ROBINS, JEFF
Address 21319 PLACIDA TERRACE
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR
Name SOWELL, LEE
Address 21520 LAGUNA DRIVE
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR
Name ORBACH, KEN
Address 21380 PLACIDA TERRACE
City-State-Zip: BOCA RATON FL 33433

Title VP
Name EDGAR, LAURIE
Address 21430 LAGUNA DRIVE
City-State-Zip: BOCA RATON FL 33433

Title TREASURER
Name BASS, KATHY
Address 21415 CAMPO ALLEGRO DRIVE
City-State-Zip: BOCA RATON FL 33433

Title PRESIDENT
Name JOHNS, SUSAN
Address 6805 ALLEGRE COURT
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: SUSAN JOHNS

PRESIDENT

03/26/2020

Electronic Signature of Signing Officer/Director Detail_____
Date