

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753078

**Entity Name:** GOLF VILLAS AT PGA NATIONAL ASSOCIATION, INC.**Current Principal Place of Business:**590 BRACKENWOOD COVE  
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**C/O SEACREST SERVICES, INC  
2101 CENTREPARK W DRIVE #110  
WEST PALM BEACH, FL 33409 US**FEI Number:** 59-2052743**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FIELDS & BACHOVE PLLC  
4440 PGA BLVD #308  
PALM BEACH GARDENS, FL 33418 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:** FIELDS & BACHOVE

01/27/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	AVERSANO, ANTHONY
Address	476 BRACKENWOOD LANE S
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	VP
Name	O'DONNELL, TOM
Address	492 BRACKENWOOD LANE S
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	ASST VICE PRESIDENT
Name	SHIELDS, STEPHEN
Address	414 BRACKENWOOD LANE S
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	TREASURER
Name	TRAVERS, JOHN
Address	118 BRACKENWOOD ROAD
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	SECRETARY
Name	KANE, MADELINE
Address	309 BRACKENWOOD CIRCLE
City-State-Zip:	PALM BEACH GARDENS FL 33418

*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:** ANTHONY AVERSANO

PRESIDENT

01/27/2023

Electronic Signature of Signing Officer/Director Detail

Date