

2021 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 STE 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 STE 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

04/21/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title TREASURER
Name LEVY, DARLA
Address 330 BRACKENWOOD CIRCLE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title SECRETARY
Name LUONGO, GINNY
Address 413 BRACKENWOOD LANE SOUTH
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name DUKE, KATHY
Address 528 BRACKENWOOD PLACE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
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

04/21/2021

Electronic Signature of Signing Officer/Director Detail

Date