## 2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 755736** 

Entity Name: PATIO VILLAGE HOMEOWNERS ASSOCIATION, INC.

FILED
Oct 19, 2021
Secretary of State
6078185116CC

## **Current Principal Place of Business:**

C/O MIAMI MANAGEMENT 1145 SAWGRASS CORPORATE PKWAY

SUNRISE, FL 33323

## **Current Mailing Address:**

C/O MIAMI MANAGEMENT 1145 SAWGRASS CORPORATE PKWAY SUNRISE, FL 33323 US

FEI Number: 59-2046374 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

BAKALAR & ASSOCIATES, PA 12470 W ATLANTIC BOULEVARD CORAL SPRINGS, FL 33071 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:

Officer/Director Detail:

Title VP Title SECRETARY

Name STEINBUCK, HENRY Name ENGLERT, JOHN

Address C/O MIAMI MANAGEMENT Address C/O MIAMI MANAGEMENT 1145 SAWGRASS CORPORATE 1145 SAWGRASS CORPORATE

PKWAY PKWAY

VVAY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

TitleTREASURERTitlePRESIDENTNameHAWKINS, MAGDANameFRALEY, JOHN

Address C/O MIAMI MANAGEMENT Address C/O MIAMI MANAGEMENT

1145 SAWGRASS CORPORATE 1145 SAWGRASS CORPORATE

PKWAY PKWAY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title DIRECTOR

Name SHERLOCK, JOHN

Address C/O MIAMI MANAGEMENT

1145 SAWGRASS CORPORATE

PKWAY

City-State-Zip: SUNRISE FL 33323

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: JOHN FRALEY PRESIDENT 10/19/2021

Date