

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 755909

Entity Name: THE VILLAGE AT WILDFLOWER COUNTRY CLUB
CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6796 GASPARILLA PINES BLVD.
ENGLEWOOD, FL 34224

Current Mailing Address:

C/O CAPSTONE ASSOCIATION MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500
SARASOTA, FL 34238 US

FEI Number: 59-2263399

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHORTZMAN, SERENA
C/O CAPSTONE ASSOCIATION MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500
SARASOTA, FL 34238 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: SERENA SCHORTZMAN

09/20/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name WILLIAM, BROWN
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

Title PRESIDENT
Name NASHAWATY, THOMAS
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

Title DIRECTOR
Name AMDOR, PATRICIA
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

Title DIRECTOR
Name TURNER, SCOTT
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

Title VP
Name PIERCE, JAMES
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

Title DIRECTOR
Name THOMAS, RON
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

Title TREASURER
Name MCCULLOUGH, CHARLENE
Address C/O CAPSTONE ASSOCIATION
MANAGEMENT
8588 POTTER PARK DRIVE SUITE 500

City-State-Zip: SARASOTA FL 34238

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 on the attached Form FD-701, as required by law.

SIGNATURE: THOMAS NASHAWATY

PRESIDENT

09/20/2023

Electronic Signature of Signing Officer/Director Detail

Date