

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 758935

Entity Name: THE SAWGRASS PLAYERS CLUB ASSOCIATION, INC.

Current Principal Place of Business:

4200 MARSH LANDING BLVD
#200
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

4200 MARSH LANDING BLVD
#200
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-2102120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOVELAND, STEPHEN C
4200 MARSH LANDING BLVD
#200
JACKSONVILLE BEACH, FL 32250 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: STEPHEN C LOVELAND

08/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name HALEY, WILLIAM
Address 113 KNOTTY PINE TRAIL
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title VP
Name STEARNS, MARC
Address 8136 SEVEN MILE DR.
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title TREASURER
Name PROCHASKA, BARBARA
Address 115 GRANADA LANE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title PRESIDENT
Name WELSH, TIMOTHY
Address 1153 CREEKS EDGE CT
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name SPRAGUE, DEREK
Address 8196 SEVEN MILE DR
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name BINACO, MORRIS
Address 6526 BURNHAM CIRCLE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name MCWADE, DEBORAH
Address 6008 BRIDGEWATER CIRCLE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name ADIUTORI, JOSEPH
Address 3039 CYPRESS CREEK DR. EAST
City-State-Zip: PONTE VEDRA BEACH FL 32082

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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: TIMOTHY WELSH

PRESIDENT

08/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	NAVIDI, GHOLAM RAY
Address	45 LOGGERHEAD LANE
City-State-Zip:	PONTE VEDRA BEACH FL 32082