### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 761048** 

Entity Name: CALUSA CLUB VILLAGE PROPERTY OWNERS ASSOCIATION,

INC.

May 08, 2020 **Secretary of State** 5231021688CC

**FILED** 

# **Current Principal Place of Business:**

18001 OLD CUTLER RD

SUITE 476

PALMETTO BAY, FL 33157

#### **Current Mailing Address:**

18001 OLD CUTLER RD SUITE 476

PALMETTO BAY, FL 33157 US

FEI Number: 59-2384482 Certificate of Status Desired: No.

### Name and Address of Current Registered Agent:

DALE C. GLASSFORD P.A. 12908 SW 133RD COURT MIAMI, FL 33186 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: DALE C. GLASSFORD 05/08/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

Address

Title Title DIRECTOR

SHAFFER, THOMAS GREEN, STEPHEN Name Name

18001 OLD CUTLER ROAD Address Address 18001 OLD CUTLER ROAD

City-State-Zip: PALMETTO BAY FL 33157 City-State-Zip: PALMETTO BAY FL 33157

Title S Title DIRECTOR

Name VAN SCHOUWEN TAYLOR. Name WEINER, ROCHELLE

ANNEMARIE Address 18001 OLD CUTLER RD 18001 OLD CUTLER ROAD Address

SUITE 476 476

PALMETTO BAY FL 33157 City-State-Zip: City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR

Title **DIRECTOR** Name GUINESS, GARY Name MARIA, LOPEZ

Address 18001 OLD CUTLER RD

18001 OLD CUTLER RD SUITE 476

SUITE 476 City-State-Zip: PALMETTO BAY FL 33157

PALMETTO BAY FL 33157 City-State-Zip:

Title D Title DIRECTOR

Name ROJAS, JUAN ALMEIDA, JUAN Name

Address 18001 OLD CUTLER RD Address

18001 OLD CUTLER RD SUITF 476 SUITE 476

PALMETTO BAY FL 33157 City-State-Zip: City-State-Zip: PALMETTO BAY FL 33157

## Continues on page 2

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: THOMAS SHAFFER **PRESIDENT** 05/08/2020

Electronic Signature of Signing Officer/Director Detail

Date

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name AMARIS, GENEVIEVE

Address 18001 OLD CUTLER RD

SUITE 476

City-State-Zip: PALMETTO BAY FL 33157

Title VP

Name ARROYO, MANUEL

Address 18001 OLD CUTLER ROAD

SUITE 476

City-State-Zip: PALMETTO BAY FL 33157

Title TREASURER
Name PEREZ, IVIS

Address 18001 OLD CUTLER RD

476

City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR

Name ECHEVERRI, STEVE

Address 18001 OLD CUTLER RD

476

City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR

Name MERINO, CRISTINA

Address 18001 OLD CUTLER RD

SUITE 476

City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR

Name DIAZ, ROBERT

Address 18001 OLD CUTLER RD

476

City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name BOYD, JUDY

Address 18001 OLD CUTLER RD

476

City-State-Zip: PALMETTO BAY FL 33157