

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767939

FILED
Feb 08, 2016
Secretary of State
CC7033605229

Entity Name: HOMEOWNERS OF PORT CHARLOTTE VILLAGE, INC.

Current Principal Place of Business:

1000 KINGS HWY #300
PORT CHARLOTTE, FL 33980

Current Mailing Address:

1000 KINGS HWY #300
PORT CHARLOTTE, FL 33980

FEI Number: 59-2283369

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOTITZKY, EDWARD L
223 TAYLOR ST.
PUNTA GORDA, FL 33950 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRES
Name GRAY, BEVERLY
Address 1000 KINGS HWY. # 429
City-State-Zip: PORT CHARLOTTE FL 33980

Title VP
Name WHEELER, RON
Address 1000 KINGS HWY. #191
City-State-Zip: PORT CHARLOTTE FL 33980

Title SEC
Name THOMASZEWICZ, PRISCILLA
Address 1000 KINGS HWY. # 314
City-State-Zip: PORT CHARLOTTE FL 33980

Title TREAS
Name HERN, JAMES
Address 1000 KINGS HWY. #330
City-State-Zip: PORT CHARLOTTE FL 33980

Title DIR
Name HOADLEY, LARRY
Address 1000 KINGS HWY. #95
City-State-Zip: PORT CHARLOTTE FL 33980

Title DIR
Name ACCARPIO, DOMINIC
Address 1000 KINGS HWY. # 176
City-State-Zip: PORT CHARLOTTE FL 33980

Title DIR
Name COOK, GARY
Address 1000 KINGS HWY. # 195
City-State-Zip: PORT CHARLOTTE FL 33980

Title GM/CAM
Name FREY, CHERI
Address 7559 RATAN CIR
City-State-Zip: PORT CHARLOTTE FL 33981

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: CHERI FREY

GM/CAM

02/08/2016

Electronic Signature of Signing Officer/Director Detail

Date