

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767939

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 BISHOP, RICHARD
Address 1000 KINGS HWY. # 310
City-State-Zip: PORT CHARLOTTE FL 33980

Title SEC
Name KOSKELA, LINDA
Address 1000 KINGS HWY. # 490
City-State-Zip: PORT CHARLOTTE FL 33980

Title DIR
Name BARBER, JOHN
Address 1000 KINGS HWY. #438
City-State-Zip: PORT CHARLOTTE FL 33980

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

Title VP
Name BRYANT, WILLIAM K
Address 1000 KINGS HWY. #444
City-State-Zip: PORT CHARLOTTE FL 33980

Title TRES
Name OAKES, RONALD
Address 1000 KINGS HWY. #420
City-State-Zip: PORT CHARLOTTE FL 33980

Title DIR
Name KELLY, GEORGE
Address 1000 KINGS HWY. # 222
City-State-Zip: PORT CHARLOTTE FL 33980

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: RICHARD BISHOP**PRES.****02/11/2014**

Electronic Signature of Signing Officer/Director Detail

Date