

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768242

Entity Name: POLYNESIAN VILLAGERS ASSOCIATION, INC.

Current Principal Place of Business:

1495 ALAMANDER AVE.
ENGLEWOOD, FL 34223

Current Mailing Address:

1495 ALAMANDER AVE.
ENGLEWOOD, FL 34223 US

FEI Number: 59-2422964

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANDER WULP, SHARON S
712 SHAMROCK BLVD
VENICE, FL 34293 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 PRESIDENT
Name GREIFF, GERRY
Address 240 TONGA LANE
City-State-Zip: ENGLEWOOD FL 34223

Title TREASURER
Name PHELPS, ROGER
Address 76 S. EASTER ISLAND CIRCLE
City-State-Zip: ENGLEWOOD FL 34223

Title SECRETARY
Name HARDER, JAN
Address 75 S. EASTER ISLAND CIRCLE
City-State-Zip: ENGLEWOOD FL 34223

Title DIRECTOR
Name OTTO, RICHARD
Address 100 N. EASTER ISLAND CIRCLE
City-State-Zip: ENGLEWOOD FL 34223

Title VP
Name FIGGINS, KEN
Address 200 N. FIJI CIRCLE
City-State-Zip: ENGLEWOOD FL 34223

Title DIRECTOR
Name MARTIN, PAUL
Address 245 TONGA LANE
City-State-Zip: ENGLEWOOD FL 34223

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: GERRY GREIFF

PRESIDENT

02/04/2015

Electronic Signature of Signing Officer/Director Detail

Date