

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768909

**Entity Name:** PGA VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2140 NW RESERVE PARK TRACE  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

2140 NW RESERVE PARK TRACE  
PORT ST. LUCIE, FL 34986 US

**FEI Number: 59-2765469**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ASSOCIATED CORPORATE SERVICES  
6111 BROKEN SOUND PARKWAY  
SUITE 200  
BOCA RATON, FL 33487 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: LOUIS CAPLAN, ESQUIRE**

**05/18/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEARY, BILL  
Address        8733 TOMPSON POINT ROAD  
City-State-Zip: PORT ST. LUCIE FL 34986

Title            VP  
Name            ALBY, CHUCK  
Address        8100 ALISTER PLACE  
City-State-Zip: PORT ST. LUCIE FL 34986

Title            TREASURER  
Name            POVER, PETER  
Address        8028 LINKS WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

Title            SECRETARY  
Name            ANTUNA, GENE  
Address        7421 BOB O LINK WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

Title            DIRECTOR  
Name            DANIELS, WILLIAM  
Address        7928 LINKS WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

Title            DIRECTOR  
Name            HALL, S. SAM  
Address        8832 CHAMPIONS WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

*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: BILL LEARY**

**PRESIDENT**

**05/18/2015**

Electronic Signature of Signing Officer/Director Detail

Date