

2018 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: Yes

Name and Address of Current Registered Agent:

CARROLL, KEVIN M
790 PARK OF COMMERCE BLVD
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: KEVIN CARROLL

04/19/2018

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 ANYUNA, GENE
Address 7421 BOB O'LINK WAY
City-State-Zip: PORT ST. LUCIE FL 34986

Title TREASURER
Name CONNOLLY, MARK
Address 8060 PLANTATION LAKES DRIVE
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name WESS, TINA
Address 7664 CHARLESTON WAY
City-State-Zip: PORT ST. LUCIE FL 34986

Title SECRETARY
Name ESKOLA, ARTHUR
Address 7907 PLANTATION LAKES DR
City-State-Zip: PORT ST. LUCIE FL 34986

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

Title DIRECTOR
Name POVER, PETER
Address 8028 LINKS 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: ARTHUR ESKOLA

SECRETARY

04/19/2018

Electronic Signature of Signing Officer/Director Detail

Date