

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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:

ENSOR, JACOB E, ESQ.
C/O ROSS EARLE BONAN & ENSOR, P.A.
789 SW FEDERAL HWY. SUITE 101
STUART, FL 34994 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: ENSOR, JACOB

06/16/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NAVARETTA, STEPHEN
Address 2140 NW RESERVE PARK TRACE
City-State-Zip: PORT ST. LUCIE FL 34986

Title VP
Name SOMERS, IVAN DR.
Address 2140 NW RESERVE PARK TRACE
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name BACHELOR, JANE
Address 2140 NW RESERVE PARK TRACE
City-State-Zip: PORT ST. LUCIE FL 34986

Title SECRETARY
Name WINTER, MARTA
Address 2140 NW RESERVE PARK TRACE
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name NORSWORTHY, JULIE
Address 2140 NW RESERVE PARK TRACE
City-State-Zip: PORT ST. LUCIE FL 34986

Title TREASURER
Name DANIELS, SHARON
Address 2140 NW RESERVE PARK TRACE
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: STEPHEN NAVARETTA

PRESIDENT

06/16/2021

Electronic Signature of Signing Officer/Director Detail

Date