

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005580

Entity Name: TAYLOR VILLAGE OWNER'S ASSOCIATION, INC.

FILED
Apr 25, 2018
Secretary of State
CC6388798994

Current Principal Place of Business:

2685 HORSESHOE DR. S.
#215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
NAPLES, FL 34104 US

FEI Number: 65-1035428

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VOGEL LAW OFFICE,P.A.
4099 TAMIAMI TRAIL NORTH
#200
NAPLES, FL 34103 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: CHRISTOPHER VOGEL

04/25/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name KOEHLER, ROBERT
Address C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
City-State-Zip: NAPLES FL 34104

Title SECRETARY
Name GUITARD, JOHN
Address C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
City-State-Zip: NAPLES FL 34104

Title VP
Name BOZZO, MICHAEL
Address C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
City-State-Zip: NAPLES FL 34104

Title TRES
Name TRACY, WILLIAM B
Address C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name SCHARRING-HAUSEN, GEORGE
Address C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
City-State-Zip: NAPLES FL 34104

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: ROBERT KOEHLER

PRESIDENT

04/25/2018

Electronic Signature of Signing Officer/Director Detail

Date