

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001309

**Entity Name:** THE PRESERVE OF VERO HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Jun 11, 2020**  
**Secretary of State**  
**4871531703CC**

**Current Principal Place of Business:**

3111 CARDINAL DRIVE  
VERO BEACH, FL 32963

**Current Mailing Address:**

3111 CARDINAL DRIVE  
VERO BEACH, FL 32963 US

**FEI Number: 65-1089594**

**Certificate of Status Desired: No**

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

O'HAIRE,QUINN, CASALINO, CHTD.  
3111 CARDINAL DRIVE  
VERO BEACH, FL 32963 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: GREGG CASALINO**

**06/11/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           DORATO, JERRY  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title           PRESIDENT  
Name           AMMIRATO, TOM  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title           SECRETARY  
Name           MAIORCA, JANNE  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title           DIRECTOR  
Name           BUXTON, ADAM  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title           VP  
Name           WALLACE, SCOTT B  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title           DIRECTOR  
Name           COTTON, ROBERT  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title           DIRECTOR  
Name           TRITLEY, BILL  
Address        3111 CARDINAL DRIVE  
City-State-Zip: VERO BEACH FL 32963

*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: JERRY DORATO**

**TREASURER**

**06/11/2020**

Electronic Signature of Signing Officer/Director Detail

Date