

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004272

Entity Name: OLD FLORIDA VILLAGE OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**10221 EMERALD COAST PKWY WEST
SUITE 5
MIRAMAR BEACH, FL 32550**Current Mailing Address:**10221 EMERALD COAST PKWY WEST
SUITE 5
MIRAMAR BEACH, FL 32550 US**FEI Number:** 04-3766247**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GELDER, JAY B
10221 EMERALD COAST PKWY WEST
SUITE 5
MIRAMAR BEACH, FL 32550 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:** JAY GELDER

04/13/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HOWER, DIANE
Address 10221 EMERALD COAST PKWY WEST
 SUITE 5
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR
Name BIGALOW, TERRY
Address 10221 EMERALD COAST PKWY WEST
 SUITE 5
City-State-Zip: MIRAMAR BEACH FL 32550

Title VP
Name DILL, WILLIAM
Address 10221 EMERALD COAST PKWY WEST
 SUITE 5
City-State-Zip: MIRAMAR BEACH FL 32550

Title SECRETARY/TREASURER
Name JACOBSON, BRUCE
Address 10221 EMERALD COAST PKWY WEST
 SUITE 5
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR
Name DAVIDSON, MIDGE
Address 10221 EMERALD COAST PKWY WEST
 SUITE 5
City-State-Zip: MIRAMAR BEACH FL 32550

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: BRUCE JACOBSON**TREASURER**

04/13/2022

Electronic Signature of Signing Officer/Director Detail

Date