

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03228

**FILED**  
**Jan 22, 2018**  
**Secretary of State**  
**CC0721273582**

**Entity Name:** BURNT STORE VILLAGE PROPERTY OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1107 WEST MARION AVENUE  
SUITE 115  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

P.O. BOX 512126  
PUNTA GORDA, FL 33951-2126 US

**FEI Number: 59-2441365**

**Certificate of Status Desired: No**

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

WOTITZKY, EDWARD L ESQ  
1107 W. MARION AVE.  
UNIT 111  
PUNTA GORDA, FL 33950 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           MERCIER, ROBERT J.  
Address        25735 PRADA DRIVE  
City-State-Zip: PUNTA GORDA FL 33955

Title           VP  
Name           MACDONALD, CHRISTOPHER  
Address        16055 HESTY MISTY  
City-State-Zip: PUNTA GORDA FL 33955

Title           SECRETARY/TREASURER  
Name           TULL, ELIZABETH  
Address        16032 HESTY MISTY CT  
City-State-Zip: PUNTA GORDA FL 33955

Title           DIRECTOR  
Name           FORMAN, SUSAN  
Address        16272 QUESA DRIVE  
City-State-Zip: PUNTA GORDA FL 33955

Title           DIRECTOR  
Name           HERZBERG, JANET  
Address        16074 OVERDALE COURT  
City-State-Zip: PUNTA FL 33955

Title           DIRECTOR  
Name           SHERMAN, TAMI  
Address        16080 HESTA MISTY CT  
City-State-Zip: PUNTA GORDA FL 33955

Title           ADMINISTRATIVE ASSISTANT  
Name           CARRIERE, DAWN  
Address        25865 PRADA DRIVE  
City-State-Zip: PUNTA GORDA FL 33955

Title           DIRECTOR  
Name           SCHAFER, STEVEN  
Address        16297 JUAREZ CIRCLE  
City-State-Zip: PUNTA GORDA FL 33955

*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: DAWN ELIZABETH CARRIERE**

**ADMINISTRATIVE ASSISTANT**

**01/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date