

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03525

Entity Name: PRESTWICK CHASE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE. SUITE 200
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE. SUITE 200
PALM BEACH GARDENS, FL 33410 US

FEI Number: 59-2491916**Certificate of Status Desired: No****Name and Address of Current Registered Agent:**

LAW OFFICES OF GARY FIELDS PA
4400 PGA BLVD
#308
PALM BEACH GARDENS, FL 33410 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: GARY FIELDS**03/08/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name MOGUILLANSKY, RUTH
Address C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE. SUITE 200

City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY
Name ALLGEIER, MARY LOU
Address C/O BRISTOL MANAGEMENT
1930 COMMERCE LANE, SUITE 1
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name ESKENAZI, MARTIN
Address C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE. SUITE 200

City-State-Zip: PALM BEACH GARDENS FL 33410

Title PRESIDENT/TREASURER
Name RUSSO, SAM
Address C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE. SUITE 200

City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name LEVINSON, CAROLE
Address 1930 COMMERCE LANE STE 1
City-State-Zip: JUPITER FL 33458

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: SAM RUSSO**PRESIDENT****03/08/2017**

Electronic Signature of Signing Officer/Director Detail

Date