

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000926

Entity Name: TEAKWOOD VILLAGE EAST SOCIAL CLUB, INC.**Current Principal Place of Business:**260 HALFMOON LANE
C/O CHERYL TRACY
LARGO, FL 33770**Current Mailing Address:**530 PARAKEET LANE
C/O VICKIE MONROE
LARGO, FL 33770 US**FEI Number:** 41-2164107**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TRACY, CHERYL A
647 POINSETTIA DR
LARGO, FL 33770 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:** CHERYL A TRACY

03/18/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MONROE, VICKI
Address 530 PARAKEET LN
City-State-Zip: LARGO FL 33770

Title VP
Name RIOS, VICKIE
Address 509 POINSETTIA DR
City-State-Zip: LARGO FL 33770

Title SECRETARY
Name LIEBLER, MAUREEN
Address 580 BLUE LN
City-State-Zip: LARGO FL 33770

Title TREASURER
Name TRACY, CHERYL A
Address 260 HALFMOON LANE
City-State-Zip: LARGO FL 33770

Title DIRECTOR
Name HAWKINS, KATHI
Address 508 POINSETTIA
City-State-Zip: LARGO FL 33770

Title DIRECTOR
Name CORTEZ, ANN
Address 543 PARAKEET
City-State-Zip: LARGO FL 33770

Title DIRECTOR
Name TOPCZIJ, TONI
Address 254 HALF MOON
City-State-Zip: LARGO FL 33770

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: CHERYL A TRACY

TREASURER

03/18/2021

Electronic Signature of Signing Officer/Director Detail

Date