

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011050

**Entity Name:** PALM RIVER TOWNHOMES HOMEOWNERS ASSOCIATION, INC.**FILED**  
**Apr 26, 2022**  
**Secretary of State**  
**1365543040CC****Current Principal Place of Business:**C/O BREEZE  
802 E. WHITING ST.  
TAMPA, FL 33602**Current Mailing Address:**C/O BREEZE  
2161 EAST COUNTY ROAD 540A #225  
LAKELAND, FL 33813 US**FEI Number: 20-4354030****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BREEZE  
C/O BREEZE  
802 E. WHITING ST.  
TAMPA, FL 33602 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:** LORI DANN

04/26/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR
Name	KULKARNI, RAGHAVENDRA
Address	1631 EAST VINE STREET STE 300
City-State-Zip:	KISSIMMEE FL 34744
Title	PRESIDENT
Name	LORI, CAMPAGNA
Address	C/O BREEZE 2161 EAST COUNTY ROAD 540A #225
City-State-Zip:	LAKELAND FL 33813

Title	DIRECTOR
Name	WRIGHT, JONATHON
Address	1631 EAST VINE STREET STE 300
City-State-Zip:	KISSIMMEE FL 34744
Title	VP
Name	KELLY, EVANS
Address	C/O BREEZE 2161 EAST COUNTY ROAD 540A #225
City-State-Zip:	LAKELAND FL 33813

Title	TREASURER, SECRETARY
Name	BENJAMIN, GAINER
Address	C/O BREEZE 2161 EAST COUNTY ROAD 540A #225
City-State-Zip:	LAKELAND FL 33813

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:** LORI CAMPAGNA**PRESIDENT**

04/26/2022

Electronic Signature of Signing Officer/Director Detail

Date