

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001099

Entity Name: SANTA ROSA GOLF VILLAS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

42 GOLF VILLAS DRVE
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

156 NORTH COUNTY HIGHWAY 393
#7
SANTA ROSA BEACH, FL 32459 US

FEI Number: 20-5347685

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOCAL ASSOCIATION MANAGEMENT
156 NORTH COUNTY HIGHWAY 393
#7
SANTA ROSA BEACH, FL 32459 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: LAM

03/25/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, SECRETARY
Name MILDE, HEATHER
Address 156 NORTH COUNTY HIGHWAY 393
 #7
City-State-Zip: SANTA ROSA BEACH FL 32459

Title DIRECTOR
Name SAUER, DOUG
Address 156 NORTH COUNTY HIGHWAY 393
 #7
City-State-Zip: SANTA ROSA BEACH FL 32459

Title PRESIDENT
Name WILLIAMS, SHANNON
Address 156 NORTH COUNTY HIGHWAY 393
 #7
City-State-Zip: SANTA ROSA BEACH FL 32459

Title VP
Name JACOBSON, DAVID
Address 156 NORTH COUNTY HIGHWAY 393
 #7
City-State-Zip: SANTA ROSA BEACH FL 32459

Title DIRECTOR
Name PERRY, JUSTIN
Address 156 NORTH COUNTY HIGHWAY 393
 #7
City-State-Zip: SANTA ROSA BEACH FL 32459

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: SHANNON WILLIAMS

PRESIDENT

03/25/2021

Electronic Signature of Signing Officer/Director Detail

Date