

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07099

Entity Name: OLD ENGLEWOOD VILLAGE ASSOCIATION, INC.**Current Principal Place of Business:**403 W. DEARBORN ST.
ENGLEWOOD, FL 34223**Current Mailing Address:**1811 ENGLEWOOD ROAD #186
ENGLEWOOD, FL 34223 US**FEI Number:** 59-2519334**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATTHEWS, BRIAN A
403 W. DEARBORN ST.
ENGLEWOOD, FL 34223 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:** BRIAN A MATTHEWS

06/23/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	BERNSTEIN, LES
Address	349 W DEARBORN STREET
City-State-Zip:	ENGLEWOOD FL 34223

Title	PRESIDENT
Name	MATTHEWS, BRIAN A
Address	233 WOODLAND DR.
City-State-Zip:	ENGLEWOOD FL 34223

Title	SECRETARY
Name	MCCUNE, NANCY
Address	832 TEXAS AVE.
City-State-Zip:	ENGLEWOOD FL 34223

Title	VP
Name	TRACY, TODD S
Address	MADDER LANE
City-State-Zip:	ENGLEWOOD FL 34223

Title	DIRECTOR
Name	O'NEIL, JEAN
Address	380 OLD ENGLEWOOD RD
City-State-Zip:	ENGLEWOOD FL 34223

Title	DIRECTOR
Name	DALES, EVELYN
Address	380 OLD ENGLEWOOD RD
City-State-Zip:	ENGLEWOOD FL 34223

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: BRIAN A MATTHEWS

PRESIDENT

06/23/2020

Electronic Signature of Signing Officer/Director Detail

Date