

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07099

Entity Name: OLD ENGLEWOOD VILLAGE ASSOCIATION, INC.**Current Principal Place of Business:**1811 ENGLEWOOD ROAD
#186
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:**BRET SHAWN CLARK PA
195 WARREN AVE
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: BRET CLARK, ESQUIRE****03/15/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title DIRECTOR
Name BERNSTEIN, LES
Address 1811 ENGLEWOOD ROAD
#186
City-State-Zip: ENGLEWOOD FL 34223Title PRESIDENT, DIRECTOR
Name PETERSON, ERIC A
Address 1811 ENGLEWOOD ROAD
#186
City-State-Zip: ENGLEWOOD FL 34223Title SECRETARY, DIRECTOR
Name MCCUNE, NANCY
Address 1811 ENGLEWOOD ROAD
#186
City-State-Zip: ENGLEWOOD FL 34223Title DIRECTOR
Name TRACY, TODD S
Address 1811 ENGLEWOOD ROAD
#186
City-State-Zip: ENGLEWOOD FL 34223Title VP, DIRECTOR
Name REIL, ROBERT
Address 1811 ENGLEWOOD RD
#186
City-State-Zip: ENGLEWOOD FL 34223Title DIRECTOR
Name DALES, EVELYN
Address 1811 ENGLEWOOD ROAD
#186
City-State-Zip: ENGLEWOOD FL 34223Title TREASURER, DIRECTOR
Name WATSON, JOHN
Address 1811 ENGLEWOOD ROAD
#186
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: NANCY MCCUNE**SECRETARY****03/15/2021**

Electronic Signature of Signing Officer/Director Detail

Date