

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07367

**FILED**  
**Mar 22, 2018**  
**Secretary of State**  
**CC9907092682****Entity Name:** THE LAKES OF PGA NATIONAL CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC  
140 INTRACOSTAL POINTE DR SUITE 306  
JUPITER, FL 33477**Current Mailing Address:**C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC  
140 INTRACOSTAL POINTE DR SUITE 306  
JUPITER, FL 33477 US**FEI Number:** 65-0052375**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WASSERSTEIN, P.A.  
301 YAMATO RD STE2199  
BOCA RATON, FL 33431 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:** RENEE RENUART**03/22/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name JARRATT, CAROLYN  
Address C/O REALTIME PROPERTY  
MANAGEMENT OF SOUTH FLORIDA,  
LLC  
140 INTRACOSTAL POINTE DR SUITE  
306  
City-State-Zip: JUPITER FL 33477

Title VP  
Name SCOTT, LINDA  
Address C/O REALTIME PROPERTY  
MANAGEMENT OF SOUTH FLORIDA,  
LLC  
140 INTRACOSTAL POINTE DR SUITE  
306  
City-State-Zip: JUPITER FL 33477

Title PRESIDENT  
Name CASELLA, CAROLE  
Address C/O REALTIME PROPERTY  
MANAGEMENT OF SOUTH FLORIDA,  
LLC  
140 INTRACOSTAL POINTE DR SUITE  
306  
City-State-Zip: JUPITER FL 33477

Title SECRETARY  
Name MORRIS, MARILYN  
Address C/O REALTIME PROPERTY  
MANAGEMENT OF SOUTH FLORIDA,  
LLC  
140 INTRACOSTAL POINTE DR SUITE  
306  
City-State-Zip: JUPITER FL 33477

Title TREASURER  
Name SNOWDEN, GAIL  
Address C/O REALTIME PROPERTY  
MANAGEMENT OF SOUTH FLORIDA,  
LLC  
140 INTRACOSTAL POINTE DR SUITE  
306  
City-State-Zip: JUPITER FL 33477

*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:** CAROLE CASELLA**PRESIDENT****03/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date