## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005826

Entity Name: DISNEY'S POLYNESIAN VILLAS & BUNGALOWS

CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

## **Current Mailing Address:**

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

FEI Number: 47-1160116 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CRAIGMILE, JEFFREY S 1375 BUENA VISTA DRIVE SUITE FOUR NORTH LAKE BUENA VISTA, FL 32830 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:

Name

Date

Officer/Director Detail:

Title **DIRECTOR & PRESIDENT** Title DIRECTOR, VICE PRESIDENT &

SECRETARY Name POTROCK, KENNETH M

Name CHANG, YVONNE 1390 CELEBRATION BOULEVARD Address

1390 CELEBRATION BOULEVARD Address City-State-Zip: CELEBRATION FL 34747

City-State-Zip: CELEBRATION FL 34747

Title **DIRECTOR** Title VICE PRESIDENT & TREASURER Name NIEMAN, LEIGH ANNE

Name SCHULTZ, TERRI A 1390 CELEBRATION BOULEVARD Address

Address 1390 CELEBRATION BOULEVARD City-State-Zip: CELEBRATION FL 34747

City-State-Zip: CELEBRATION FL 34747

Title Title VICE PRESIDENT & ASSISTANT ASSISTANT SECRETARY

**TREASURER** DEESE-BYRNES, SONYA

Name PAULSEN, BRIAN

Address 1390 CELEBRATION BOULEVARD Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title **DIRECTOR & VICE PRESIDENT** 

DIRECTOR, VICE PRESIDENT &

Name SAKASKE, SHANNON

1390 CELEBRATION BOULEVARD Address

City-State-Zip: CELEBRATION FL 34747

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: YVONNE CHANG DIRECTOR 03/07/2016

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Mar 07, 2016

Secretary of State

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