2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N30998

Entity Name: PALM BREEZES HOMEOWNERS ASSO. INC.

FILED
Aug 17, 2021
Secretary of State
0292287079CC

Current Principal Place of Business:

3369 LAKE OVERLOOK PLACE LANTANA, FL 33462

Current Mailing Address:

3369 LAKE OVERLOOK PLACE LANTANA, FL 33462 US

FEI Number: 65-0338332 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REA, THOMAS 3369 LAKE OVERLOOK PLACE LANTANA, FL 33462 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: THOMAS REA 08/17/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **TREASURER** Title **PRESIDENT** Name REA, THOMAS Name MC DONALD, KIM 6162 SEASHORE DRIVE Address 3369 LAKE OVERLOOK PLACE Address City-State-Zip: LANTANA FL 33462 LANTANA FL 33462 City-State-Zip:

Title VP Title SECRETARY

NameSHOULDIS, SUENameANTHONY, ORLANDOAddress6143 PALM BREEZES DRIVEAddress6042 SEASHORE DRIVECity-State-Zip:LANTANA FL 33462City-State-Zip:LANTANA FL 33462

Title DIRECTOR Title DIRECTOR

Name DEAN, DONNA Name ENFIELD, WALTER

Address 3397 SEACOAST STREET Address 6068 PALM BREEZES DRIVE

City-State-Zip: LANTANA FL 33462 City-State-Zip: LANTANA FL 33462

Title DIRECTOR Title DIRECTOR

Name TOWNSEND, JANET Name LAWRENCE, JENNIFER

Address 6075 PALN HARBOUR DRIVE Address 6167 PALM HARBOUR DRIVE

City-State-Zip: LANTANA FL 33462 City-State-Zip: LANTANA FL 33462

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: THOMAS REA TREASURER 08/17/2021