

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47493

Entity Name: GREENBRIAR AT BONITA BAY MASTER ASSOCIATION, INC.**FILED**
Apr 16, 2024
Secretary of State
0599272055CC**Current Principal Place of Business:**C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
CLEARWATER, FL 33762**Current Mailing Address:**C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
CLEARWATER, FL 33762 US**FEI Number:** 65-0337787**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MEZZOLINE, DOMINICK
6609 WILLOW PARK DR
SUITE 201
NAPLES, FL 34109 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:** DOMINICK MEZZOLINE

04/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	KENEIPP, MICHAEL
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762

Title	VP
Name	VULBROCK, DAVID
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762

Title	SECRETARY
Name	COYNE, THOMAS
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762

Title	DIRECTOR
Name	LEHMANN, ERIC & CHRISTY
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762

Title	DIRECTOR
Name	FERRALL, MARY
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762

Title	TREASURER
Name	TATE, DAVID
Address	3001 EXECUTIVE DRIVE, STE 260
City-State-Zip:	CLEARWATER FL 33762

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: KENEIPP , MICHAEL

PRESIDENT

04/16/2024

Electronic Signature of Signing Officer/Director Detail

Date