

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000853

Entity Name: VILLAGE GREEN OF FOREST LAKES CONDOMINIUM,
SECTION 12, ASSOCIATION, INC.

FILED
Mar 16, 2021
Secretary of State
4142443748CC

Current Principal Place of Business:

PROGRESSIVE COMMUNITY MGMT., INC.
3701 SOUTH OSPREY AVENUE
SARASOTA, FL 34239

Current Mailing Address:

PROGRESSIVE COMMUNITY MGMT., INC.
3701 SOUTH OSPREY AVENUE
SARASOTA, FL 34239 US

FEI Number: 59-2110237

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROGRESSIVE COMMUNITY MGMT., INC
3701 SOUTH OSPREY AVENUE
SARASOTA, FL 34239 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: WILLIAM SUTTON

03/16/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name DABENIGNO, JOSEPH
Address 3701 SOUTH OSPREY AVENUE
City-State-Zip: SARASOTA FL 34239

Title SD
Name FITZPATRICK, CAROLYN
Address 3701 SOUTH OSPREY AVENUE
City-State-Zip: SARASOTA FL 34239

Title D
Name RAKIEC, DANIEL
Address 3701 SOUTH OSPREY AVENUE
City-State-Zip: SARASOTA FL 34239

Title TD
Name KRAFT, JIM
Address 3701 SOUTH OSPREY AVENUE
City-State-Zip: SARASOTA FL 34239

Title VPD
Name NAVITSKY, EVELYN
Address 3701 SOUTH OSPREY AVENUE
City-State-Zip: SARASOTA FL 34239

Title ASST TD
Name SUTTON, WILLIAM
Address 3701 SOUTH OSPREY AVENUE
City-State-Zip: SARASOTA FL 34239

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: JOSEPH DABENIGNO

P

03/16/2021

Electronic Signature of Signing Officer/Director Detail

Date