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: ED LEPAGE

Electronic Signature of Signing Officer/Director Detail

Entity Name: PALM VILLAS CONDOMINIUM ASSOCIATION, INC.

# **Current Principal Place of Business:**

2113 RUBY RED BLVD - STE. B CLERMONT, FL 34714

DOCUMENT# N9300002871

# **Current Mailing Address:**

2113 RUBY RED BLVD - STE. B CLERMONT. FL 34714 US

# FEI Number: 20-2447764

#### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

EXTREME MANAGEMENT TEAM, LLC 2113 RUBY RED BLVD - STE. B CLERMONT, FL 34714 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:

Officer/Director Detail :			
Title	PRESIDENT	Title	DIRECTOR
Name	LEPAGE, ED	Name	CEBADA, PATRICIA
Address	2113 RUBY RED BLVD - STE. B	Address	2113 RUBY RED BLVD - STE. B
City-State-Zip:	CLERMONT FL 34714	City-State-Zip:	CLERMONT FL 34714
Title	DIRECTOR		
Name	WISNIEWSKI, GLEN		
Address	2113 RUBY RED BLVD - STE. B		
City-State-Zip:	CLERMONT FL 34714		

Certificate of Status Desired: No

Secretary of State 1368177288CC

FILED Mar 07, 2022

03/07/2022

Date

# 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

PRESIDENT

Date