

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000000090

Entity Name: FAIRWAY OAKS, THE GREENS, AND THE RESERVE AT PELICAN POINTE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ACCESS MANAGEMENT
2970 UNIVERSITY PARKWAY SUITE 101
SARASOTA, FL 34243

Current Mailing Address:

C/O ACCESS MANAGEMENT
2970 UNIVERSITY PARKWAY SUITE 101
SARASOTA, FL 34243 US

FEI Number: 65-0526897

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACCESS MANAGEMENT
C/O ACCESS MANAGEMENT
2970 UNIVERSITY PARKWAY SUITE 101
SARASOTA, FL 34243 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: CATHY BRAND

04/18/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LIBERTINI, JIM
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

Title SECRETARY
Name RITACCO, GREGORY
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

Title VP
Name SILVERMAN, BARRY
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

Title TREASURER
Name BISIGHINI, LYNN
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

Title DIRECTOR
Name GAGAIN, JOANN
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

Title DIRECTOR
Name DONNELLAN, MICHAEL
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

Title DIRECTOR
Name TRECIAC, WILLIAM
Address C/O ACCESS MANAGEMENT
 2970 UNIVERSITY PARKWAY SUITE
 101
City-State-Zip: SARASOTA FL 34243

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: JIM LIBERTINI BY HOPE ROOT ON BEHALF OF THE BOARD PRESIDENT
BOD

04/18/2024

Electronic Signature of Signing Officer/Director Detail

Date