

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001148

Entity Name: THE PHIPPS ESTATES HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**340 ROYAL POINCIANA WAY
SUITE 317, PMB 378
PALM BEACH, FL 33480**Current Mailing Address:**C/O LIST COMPANIES, 340 ROYAL POINCIANA WA
#317, PMB 378
PALM BEACH, FL 33480 US**FEI Number:** 65-0684355**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LIST, MARTIN A
C/O LIST COMPANIES, 340 ROYAL POINCIANA WA
#317, PMB 378
PALM BEACH, FL 33480 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title PRESIDENT
Name GOLDMAN, MARK
Address 242 VIA LAS BRISAS
City-State-Zip: PALM BEACH FL 33480Title TREASURER
Name BRIM, JOHN
Address 234 VIA LAS BRISAS
City-State-Zip: PALM BEACH FL 33480Title DIRECTOR
Name BRINKER, NANCY
Address 211 VIA TORTUGA
City-State-Zip: PALM BEACH FL 33480Title VP
Name PIZZAGALLI, JAMES
Address 210 VIA TORTUGA
City-State-Zip: PALM BEACH FL 33480Title DIRECTOR
Name PRIEM, SUSAN
Address 238 VIA LAS BRISAS
City-State-Zip: PALM BEACH FL 33480Title SECRETARY
Name VICTOR, ROYALL III
Address 208 VIA TORTUGA
City-State-Zip: PALM BEACH FL 33480

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: MARK GOLDMAN

PRESIDENT

06/18/2020

Electronic Signature of Signing Officer/Director Detail_____
Date