SIGNATURE	E: BUDGE HUSKEY		06/15/2	202	
	Electronic Signature of Registered Agent		Date	•	
Officer/Dire	ctor Detail :				
Title	D	Title	DIRECTOR		
Name	LUTGERT, SCOTT	Name	GREEN, JUDITH ANNE		
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350		
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103		
Title	VTSD	Title	MANAGER		
Name	GUTMAN, HOWARD B	Name	BRADWAY, LINDA SHEARER		
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350		
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103		
Title	MANAGER	Title	MANAGER		
Name	PATERSON, MARYELLEN	Name	OUELLETTE, KIM		
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350		
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103		
Title	MANAGER	Title	MANAGER		
Name	GAPE, DAVID ALAN	Name	KANT, PATRICIA		
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350		
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103		
		•	Continues on page 2		

Current Principal Place of Business:

4001 TAMIAMI TRAIL NORTH, SUITE 350 NAPLES, FL 34103

#### **Current Mailing Address:**

4001 TAMIAMI TRAIL NORTH, SUITE 350 NAPLES, FL 34103 US

### FEI Number: 59-2258867

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

HUSKEY, BUDGE 4001 TAMIAMI TRAIL NORTH, SUITE 350 NAPLES, FL 34103 US

Continues on page 2

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: BUDGE HUSKEY

PRESIDENT & CEO

06/15/2021

2021 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# G13720

## Entity Name: PREMIER PROPERTIES OF SOUTHWEST FLORIDA, INC.

# FILED Jun 15, 2021 Secretary of State 5415695734CC

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail

## **Officer/Director Detail Continued :**

Title	CEO, PRESIDENT	Title	MANAGER
Name	HUSKEY, BUDGE STRATTON	Name	WILLIAMS, DANIEL R
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103
Title	MANAGER	Title	MANAGER
Name	CERRETA, CRAIG	Name	POLLACK PRIETO, CAROLYN ANN
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE
City-State-Zip:	NAPLES FL 34103	Address	350
Title	MANAGER	City-State-Zip:	NAPLES FL 34103
Name	FISHER, RACHEL LEA	Title	MANAGER
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Name	WATERBURY, SANDRA GREENE
City-State-Zip:	NAPLES FL 34103	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350
Title	MANAGER	City-State-Zip:	NAPLES FL 34103
Name	GROSVENOR FELTS, CHELSEA	Title	VP
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Name	NEWELL, KRISTINE
City-State-Zip:	NAPLES FL 34103	Address	4001 TAMIAMI TRAIL NORTH, SUITE
Title	MANAGER	City-State-Zip:	NAPLES FL 34103
Name	MCDONALD, ERIN	5	
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Title	MANAGER
City-State-Zip:	NAPLES FL 34103	Name	MAX, JUANITA
Title	MANAGER	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350
Name	HENDRIKS, PAUL BRENT	City-State-Zip:	NAPLES FL 34103
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350		
City-State-Zip:			