SIGNATURE	E: BUDGE HUSKEY		05/27/2020		
	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	MC CARTHY, CATHERINE M		
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	BRADWAY, LINDA SHEARER	Name	PATERSON, MARYELLEN		
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	HORSTMANN, M VICTORIA	Name	MARABELLA, JOHN		
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 nage 2		

2020 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G13720

Entity Name: PREMIER PROPERTIES OF SOUTHWEST FLORIDA, INC.

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: JUDITH ANNE GREEN

DIRECTOR

05/27/2020

Electronic Signature of Signing Officer/Director Detail

Date

FILED May 27, 2020 Secretary of State 2775831937CC

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	MANAGER	Title	MANAGER
Name	OUELLETTE, KIM	Name	GAPE, DAVID ALAN
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Address	4001 TAMIAMI TRAIL NORTH, SUITE 350
City-State-Zip:	b: NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103
Title Name Address City-State-Zij Title Name Address	MANAGER KANT, PATRICIA 4001 TAMIAMI TRAIL NORTH, SUITE 350 D: NAPLES FL 34103 MANAGER WILLIAMS, DANIEL R 4001 TAMIAMI TRAIL NORTH, SUITE 350	Title Name Address City-State-Zip: Title Name	CEO, PRESIDENT HUSKEY, BUDGE STRATTON 4001 TAMIAMI TRAIL NORTH, SUITE 350 NAPLES FL 34103 MANAGER CERRETA, CRAIG
City-State-Zi		Address City-State-Zip:	4001 TAMIAMI TRAIL NORTH, SUITE 350 NAPLES FL 34103
Title Name Address City-State-Zi	MANAGER MACCARONE, CHRISTINE M 4001 TAMIAMI TRAIL NORTH, SUITE 350 D: NAPLES FL 34103	Title Name Address	MANAGER POLLACK PRIETO, CAROLYN ANN 4001 TAMIAMI TRAIL NORTH, SUITE
Title Name	MANAGER FISHER, RACHEL LEA	City-State-Zip:	350 NAPLES FL 34103
Address City-State-Zi	4001 TAMIAMI TRAIL NORTH, SUITE 350 p: NAPLES FL 34103	Title Name Address	MANAGER GOOD, MATTHEW 4001 TAMIAMI TRAIL NORTH, SUITE
Title Name	MANAGER WATERBURY, SANDRA GREENE	City-State-Zip:	350 NAPLES FL 34103
Address	4001 TAMIAMI TRAIL NORTH, SUITE 350	Title	MANAGER
City-State-Zi	D: NAPLES FL 34103	Name	GROSVENOR FELTS, CHELSEA
		Address	4001 TAMIAMI TRAIL NORTH, SUITE 350

City-State-Zip: NAPLES FL 34103