2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057254

Entity Name: PROPERTIES OF THE VILLAGES, INC.

Current Principal Place of Business:

3619 KIESSEL ROAD THE VILLAGES, FL 32163

Current Mailing Address:

3619 KIESSEL ROAD THE VILLAGES, FL 32163 US

FEI Number: 59-3256843

Name and Address of Current Registered Agent:

HUDSON, BRIAN D ESQ. 3619 KIESSEL ROAD THE VILLAGES, FL 32163 US

Date

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	DIRECTOR	Title	DIRECTOR, PRESIDENT
Name	MORSE, MARK G.	Name	PARR, JENNIFER L.
Address	3619 KIESSEL ROAD	Address	3619 KIESSEL ROAD
City-State-Zip:	THE VILLAGES FL 32163	City-State-Zip:	THE VILLAGES FL 32163
Title	DIRECTOR	Title	VP, SECRETARY
Name	DADEO, TRACY MORSE	Name	MANLY, KELSEA MORSE
Address	3619 KIESSEL ROAD	Address	3619 KIESSEL ROAD
City-State-Zip:	THE VILLAGES FL 32163	City-State-Zip:	THE VILLAGES FL 32163
Title	VP, ASST. SECRETARY	Title	VP
Title Name	VP, ASST. SECRETARY BERNING, MICHAEL W.	Title Name	VP BOONE, HARPER D.
Name	BERNING, MICHAEL W.	Name	BOONE, HARPER D.
Name Address	BERNING, MICHAEL W. 3619 KIESSEL ROAD	Name Address	BOONE, HARPER D. 3619 KIESSEL ROAD
Name Address City-State-Zip:	BERNING, MICHAEL W. 3619 KIESSEL ROAD THE VILLAGES FL 32163	Name Address City-State-Zip:	BOONE, HARPER D. 3619 KIESSEL ROAD THE VILLAGES FL 32163
Name Address City-State-Zip: Title	BERNING, MICHAEL W. 3619 KIESSEL ROAD THE VILLAGES FL 32163 VP	Name Address City-State-Zip: Title	BOONE, HARPER D. 3619 KIESSEL ROAD THE VILLAGES FL 32163 TREASURER
Name Address City-State-Zip: Title Name	BERNING, MICHAEL W. 3619 KIESSEL ROAD THE VILLAGES FL 32163 VP GULATI, SUNDEEP	Name Address City-State-Zip: Title Name	BOONE, HARPER D. 3619 KIESSEL ROAD THE VILLAGES FL 32163 TREASURER STOFF, KENNETH D. 3619 KIESSEL ROAD

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: KELSEA MORSE MANLY

VICE PRESIDENT

03/04/2020

Electronic Signature of Signing Officer/Director Detail

Date