

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768242

FILED
Mar 05, 2012
Secretary of State

Entity Name: POLYNESIAN VILLAGERS ASSOCIATION, INC.

Current Principal Place of Business:

1495 ALAMANDER AVE.
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

1495 ALAMANDER AVE.
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 59-2422964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDER WULP, SHARON S
712 SHAMROCK BLVD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VICE
Name: PHELPS, ROGER
Address: 76 S. EASTER ISLAND CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223

Title: T
Name: DIRR, TY
Address: 228 TASMANIA LANE
City-St-Zip: ENGLEWOOD, FL 34223

Title: P
Name: EWING, PAUL
Address: 246 TONGA LANE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: KEIDEL, PHYLLIS
Address: 167 N. FIJI CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: GRIEFF, PAT
Address: 240 TONGA LN
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: LARSON, RICHARD
Address: 91 N. EASTER ISLAND CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223

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: PAUL EWING

PRES

03/05/2012

Electronic Signature of Signing Officer or Director

Date