2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2012
Secretary of State

DOCUMENT# N96000005729

Entity Name: THE RESORT VILLAS AT PGA NATIONAL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O UNITED COMMUNITY MANAGEMENT CORP.
11784 W. SAMPLE ROAD, #103
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

C/O UNITED COMMUNITY MANAGEMENT CORP.
11784 W. SAMPLE ROAD, #103
CORAL SPRINGS, FL 33065 US

New Mailing Address:

11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0713147 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP.
11784 W. SAMPLE ROAD, #103
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 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: ANA MONTOYA 03/30/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: GILMOR, WILLIAM
Address: 403 RESORT LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VP
Name: SCHMIDT, NANCY
Address: 101 RESORT LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: T
Name: SOFIA, THEODORE
Address: 502 RESORT LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: S
Name: ROSENSTEIN, BEVERLY
Address: 505 RESORT LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: D
Name: BRACA, DON
Address: 301 RESORT LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: ANA MONTOYA D 03/30/2012
Electronic Signature of Signing Officer or Director Date