

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719845

Entity Name: HOLLY GREENS VILLA, INC.**Current Principal Place of Business:**3070 GULF SHORE BOULEVARD NORTH
NAPLES, FL 34103**Current Mailing Address:**4949 TAMIAMI TRAIL N
STE 201
NAPLES, FL 34103 US**FEI Number:** 59-1405101**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOORE, WILLIAM
C/O MELDON CONSULTANTS
4949 TAMIAMI TRL N STE201
NAPLES, FL 34103 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY, DIRECTOR
Name	JOHNSON, JOAN
Address	3070 GULF SHORE BLVD N #202
City-State-Zip:	NAPLES FL 34103

Title	TREASURER, DIRECTOR
Name	ANDERSON, BILL
Address	3070 GULF SHORE BLVD N #105
City-State-Zip:	NAPLES FL 34103

Title	PRESIDENT, DIRECTOR
Name	WILLIAMS, ROY
Address	3070 GULF SHORE BLVD N #110
City-State-Zip:	NAPLES FL 34103

Title	VP, DIRECTOR
Name	DIGAETANO, LOUIS S
Address	3070 GULF SHORE BLVD N., #206
City-State-Zip:	NAPLES FL 34103

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: ROY WILLIAMS

PRESIDENT

04/28/2023

Electronic Signature of Signing Officer/Director Detail_____
Date