

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 721970

**Entity Name:** VILLAGE IN THE PINES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

9031 TOWN CENTER PKWY  
BRADENTON, FL 34202

**Current Mailing Address:**

9031 TOWN CENTER PKWY  
BRADENTON, FL 34202 US

**FEI Number:** 59-1635519

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ADVANCED MGMT OF SW FLORIDA INC.  
9031 TOWN CENTER PKWY  
BRADENTON, FL 34202 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:** MAT D WILSON

08/30/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KONRAD, JO-ANNE  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            ALBERTS, RONALD  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            KOTASEK, DAVID  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            SECRETARY  
Name            ZEIGLER, DOTTIE  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            TREASURER  
Name            JAYCOX, VIRGEL  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            STARNER, CAROL  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            SECCHIA, ROSEANN  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            VP  
Name            MALLIE, MARSHALL  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

**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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAT D WILSON

AS

08/30/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            ROSENFELD, NATHAN  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202

Title            ASST. SECRETARY  
Name            WILSON, MAT D  
Address        9031 TOWN CENTER PKWY  
City-State-Zip: BRADENTON FL 34202