

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744191

FILED
Mar 02, 2022
Secretary of State
3591891789CC

Entity Name: PINE BREEZE GOLF VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5146 SE MILES GRANT TERR
STUART, FL 34997

Current Mailing Address:

PINE BREEZE GOLF VILLAS
P.O. BOX 1013
PORT SALERNNO, FL 34992

FEI Number: 59-1977363

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEED, BETTY
5179 SE MILES GRANT TER
STUART, FL 34997 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: BETTY WEED

03/02/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WEED, BETTY
Address 5179 SE MILES GRANT TERR
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name MCNEIL, JOANNE
Address 5167 SE MILES GRANT
City-State-Zip: STUART FL 34997

Title VP
Name MECKUS, KEVIN
Address 5143 SE MILES GRANT TER
City-State-Zip: STUART FL 34997

Title SECRETARY/TREASURER
Name DOWD, ALENE
Address 5154 SE MILES GRANT TER
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name BARNES, KATHY
Address 5163 SE MILES GRANT TER
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name RUDDY, MIKE
Address 5155 SE MILES GRANT TER
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name ZMICH, TERRY
Address 5125 SE MILES GRANT TER
City-State-Zip: STUART FL 34997

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: BETTY WEED

PRESIDENT

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date