

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751525

**FILED**  
**Apr 07, 2023**  
**Secretary of State**  
**3681016056CC**

**Entity Name:** PRADERA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
BOCA RATON, FL 33431

**Current Mailing Address:**

C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
BOCA RATON, FL 33431 US

**FEI Number:** 59-2154960

**Certificate of Status Desired:** No

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

KONYK & LEMME PLLC  
140 INTRACOASTAL POINTE DRIVE  
SUITE 310  
JUPITER, FL 33477 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:** CHELLE KONYK

04/07/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name BONITATIBUS, PETER  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name ROBINS, JEFF  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title TREASURER  
Name GLADSTONE, DEVIN  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT  
Name EDGAR, LAURIE  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name FOLGATE, RANDALL  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name RAPPAPORT, STANLEY  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY  
Name LYNCH, EDWARD  
Address C/O HAWK-EYE MANAGEMENT, LLC  
1800 NW CORPORATE BLVD SUITE 200  
City-State-Zip: BOCA RATON FL 33431

*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:** LAURIE EDGAR

PRESIDENT

04/07/2023

