

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755991

**FILED
Mar 19, 2014
Secretary of State
CC0887167155**

Entity Name: POINCIANA VILLAGE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

3150 VIA POINCIANA
LAKE WORTH, FL 33467

Current Mailing Address:

C/O PMS CORP 5430 10TH AVE NORTH
SUITE B
GREENACRES, FL 33463 US

FEI Number: 59-2166048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PMS, INC
5430 10TH AVE NORTH
SUITE B
GREENACRES, FL 33463 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 P
Name WAXMAN, BUD
Address 6768 10TH AVENUE NORTH #211
City-State-Zip: LAKE WORTH FL 33467

Title T/S
Name EISNER, MILTON
Address 3212 STRAWFLOWER WAY#109
City-State-Zip: LAKE WORTH FL 33467

Title D
Name SHAPIRO, PAUL
Address 3154 VIA POINCIANA #108
City-State-Zip: LAKE WORTH FL 33467

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: PAUL SHAPIRO

DIRECTOR

03/19/2014

Electronic Signature of Signing Officer/Director Detail

_____ Date