## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00330

Entity Name: P.R.N.II.I.M.A, INC.

**FILED** Jan 25, 2020 **Secretary of State** 6638583889CC

## **Current Principal Place of Business:**

600 SEA PINE WAY **CLUBHOUSE** 

WEST PALM BEACH, FL 33415

## **Current Mailing Address:**

600 SEA PINE WAY **CLUBHOUSE** WEST PALM BEACH, FL 33415

FEI Number: 59-2355501 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

MONCHICK, MICHAEL J. 1501 OLD OKEECHOBEE RD W PALM BCH, FL 33409 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:

**TREASURER** Title Title DIRECTOR

TILLINGHAST, MARY J Name Name TILLINGHAST, ALAN Address 600 SEA PINE WAY Address 600 SEA PINE WAY

**CLUBHOUSE CLUBHOUSE** 

WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 City-State-Zip: City-State-Zip:

Title **PRESIDENT** Title **SECRETARY** 

GANGE, CLAUDE BENJAMIN, JOAN Name Name

600 SEA PINE WAY 600 SEA PINE WAY Address Address

**CLUBHOUSE CLUBHOUSE** 

WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 City-State-Zip: City-State-Zip:

Title ۷P

SHAPIRO, KAREN Name 600 SEA PINE WAY Address

**CLUBHOUSE** 

WEST PALM BEACH FL 33415 City-State-Zip:

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.

01/25/2020 SIGNATURE: ALAN TILLINGHAST DIRECTOR