Entity Name: PLEASANT GARDENS HOMEOWNERS ASSOCIATION, INC.			INC.	Secretary of State 7455331826CC	
Current Prin 2 CAMINO DEL PALM COAST,				743333102000	
Current Mai	ling Address:				
	CE BOX 350279 ST, FL 32173 US				
FEI Number: 01-0698655			Certificate of Status Desired: No		
Name and A	Address of Current Registered Agent:				
2 CAMINO DEL	FATES MANAGEMENT GROUP, INC. MAR				
PALM COAST,	FL 32137 US				
	FL 32137 US	stered office or regis	tered agent, or both, in	the State of Florida.	
The above named		stered office or regis	tered agent, or both, in	the State of Florida. 04/25/2021	
The above named	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in		
The above named	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in	04/25/2021	
The above named	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in	04/25/2021	
The above named SIGNATURE Officer/Dire	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent ctor Detail :			04/25/2021	
The above named SIGNATURE Officer/Dired Title	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent Ctor Detail : PD	Title	VPD	04/25/2021 Date	
The above named SIGNATURE Officer/Dired Title Name	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent Ctor Detail : PD JOSEPH, KELVIN POST OFFICE BOX 350279	Title Name Address	VPD DAVIS, PATRICE	04/25/2021 Date	
The above named SIGNATURE Officer/Dired Title Name Address	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent Ctor Detail : PD JOSEPH, KELVIN POST OFFICE BOX 350279	Title Name Address	VPD DAVIS, PATRICE POST OFFICE BC	04/25/2021 Date	
The above named SIGNATURE Officer/Dired Title Name Address City-State-Zip:	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent Ctor Detail : PD JOSEPH, KELVIN POST OFFICE BOX 350279 PALM COAST FL 32173	Title Name Address	VPD DAVIS, PATRICE POST OFFICE BC	04/25/2021 Date	
The above named SIGNATURE Officer/Dired Title Name Address City-State-Zip: Title	d entity submits this statement for the purpose of changing its regis E: FRED ANNON, JR. Electronic Signature of Registered Agent Ctor Detail : PD JOSEPH, KELVIN POST OFFICE BOX 350279 PALM COAST FL 32173 STD	Title Name Address	VPD DAVIS, PATRICE POST OFFICE BC	04/25/2021 Date	

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100006557

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: KELVIN JOSEPH

PRESIDENT

04/25/2021

FILED Apr 25, 2021

Secretary of State

Electronic Signature of Signing Officer/Director Detail