

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03231

**FILED**  
**Jan 09, 2014**  
**Secretary of State**  
**CC4558211366**

**Entity Name:** SECTION 20 PROPERTY OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

24901 SANDHILL BLVD  
UNIT 15  
PUNTA GORDA, FL 33983

**Current Mailing Address:**

24901 SANDHILL BLVD  
UNIT 15  
PUNTA GORDA, FL 33983 US

**FEI Number: 59-2441508**

**Certificate of Status Desired: No**

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

JAKUBAITIS, KIM  
24901 SANDHILL BLVD  
UNIT 15  
PUNTA GORDA, FL 33983 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            PRESIDENT  
Name            DEBRUYN, CLAUDIA  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

Title            VP  
Name            URRUTIA, LUIS  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

Title            TREASURER  
Name            COLLINS, DANIEL  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

Title            SECRETARY  
Name            PAPPA, BEN  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

Title            DIRECTOR  
Name            BAILEY, JOHN  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

Title            DIRECTOR  
Name            BRIZZOLARA, ED  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

Title            DIRECTOR  
Name            MANSUR, JOHN  
Address        24901 SANDHILL BLVD  
                  UNIT 15  
City-State-Zip: PUNTA GORDA FL 33983

*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: CLAUDIA DEBRUYN**

**PRESIDENT**

**01/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date