## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400001650

Entity Name: TALIS PARK GOLF CLUB, INC.

Apr 17, 2023 Secretary of State 2816016544CC

**FILED** 

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

4500 PGA BOULEVARD

SUITE 400

PALM BEACH GARDENS, FL 33418

## **Current Mailing Address:**

4500 PGA BOULEVARD SUITE 400

PALM BEACH GARDENS, FL 33418 US

FEI Number: 20-0752611 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HOLIHEN, TERRENCE R 4500 PGA BOULEVARD SUITE 400

PALM BEACH GARDENS, FL 33418 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: TERRENCE R. HOLIHEN 04/17/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title MEMBER Title PRESIDENT

Name KE TALIS PARK PROPERTIES, LLC Name KITSON, TYLER W

Address 4500 PGA BOULEVARD Address 4500 PGA BOULEVARD

SUITE 400 SUITE 400

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33418

Title EXECUTIVE VP Title VP

Name HOBAN, THOMAS M Name STEWART, BUTCH

Address 4500 PGA BOULEVARD Address 4500 PGA BOULEVARD

SUITE 400 SUITE 400

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP, SECRETARY Title ASST. SECRETARY
Name HOLIHEN, TERRENCE R Name MATTSSON, KATHI

Address 4500 PGA BOULEVARD Address 4500 PGA BOULEVARD

SUITE 400 SUITE 400

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33418

Title TREASURER Title ASST. TREASURER

Name MORALES, JULIO E Name BRATHWAITE, SHARON

Address 4500 PGA BOULEVARD Address 4500 PGA BOULEVARD

SUITE 400 SUITE 400

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33418

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: TERRENCE HOLIHEN REGISTERED AGENT 04/17/2023