

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006651

**Entity Name:** PALMA VISTA AT PALMA SOLA HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 28, 2021**  
**Secretary of State**  
**8837082021CC**

**Current Principal Place of Business:**

1651 WHITFIELD AVE  
SUITE 200  
SARASOTA, FL 34243

**Current Mailing Address:**

1651 WHITFIELD AVE  
SUITE 200  
SARASOTA, FL 34243 US

**FEI Number: 20-2920564**

**Certificate of Status Desired: No**

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

TOKARZ, CHARLIE  
1651 WHITFIELD AVE  
SUITE 200  
SARASOTA, FL 34243 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            BERUFF, CARLOS  
Address        1651 WHITFIELD AVE  
                  SUITE 200  
City-State-Zip: SARASOTA FL 34243

Title            VICE PRESIDENT, SECRETARY  
Name            CHAVEZ, CHRIS  
Address        1651 WHITFIELD AVE  
                  SUITE 200  
City-State-Zip: SARASOTA FL 34243

Title            TREASURER  
Name            TOKARZ, CHARLES  
Address        1651 WHITFIELD AVE  
                  SUITE 200  
City-State-Zip: SARASOTA FL 34243

*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: CHARLES TOKARZ**

**TREAS**

**04/28/2021**

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

\_\_\_\_\_  
Date