

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011461

Entity Name: SAWGRASS VILLAGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6972 LAKE GLORIA BLVD
ORLANDO, FL 32809**Current Mailing Address:**6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US**FEI Number:** 20-2708935**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LELAND MGMT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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 SECRETARY, TREASURER
Name O'SHEA, JOHN L
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title PRESIDENT
Name MEYERS, JEROME
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name ELLIS, MELISSA
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name FORDE, DWIGHT
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLAND FL 32809

Title DIRECTOR
Name REYNOLDS, BRITNI
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name PEARSON, ALEXANDRA
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

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: JEROME MEYERS

PRESIDENT

06/19/2020

Electronic Signature of Signing Officer/Director Detail_____
Date