

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009238

Entity Name: PALM BREEZES PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**9631 WINDRIFT CIR.
FT. PIERCE, FL 34945**Current Mailing Address:**9631 WINDRIFT CIR.
FT. PIERCE, FL 34945 US**FEI Number: 20-8440284****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
401 SE OSCEOLA STREET, FIRST FLOOR
STUART, FL 34994 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	VP-1
Name	CHENETTE, WILLIAM
Address	270 PALM BREEZES DR.
City-State-Zip:	FT. PIERCE FL 34945

Title	PRESIDENT
Name	PAYEN, YVES
Address	9447 WINDRIFT CIR.
City-State-Zip:	FT. PIERCE FL 34945

Title	VP-2
Name	VALISH, JOY
Address	148 BLUE GROTTTO DR.
City-State-Zip:	FT. PIERCE FL 34945

Title	TREASURER
Name	VALISH, BRIAN
Address	148 BLUE GROTTTO DR.
City-State-Zip:	FT. PIERCE FL 34945

Title	SECRETARY
Name	FELIX, MICHELLE
Address	9525 WINDRIFT CIR.
City-State-Zip:	FT. PIERCE FL 34945

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: YVES PAYEN**PRESIDENT****04/18/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date