

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000009238

**Entity Name:** PALM BREEZES PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O CAMPBELL PROPERTY MANAGEMENT  
401 MAPLEWOOD DR SUITE 23  
JUPITER, FL 33458**Current Mailing Address:**C/O CAMPBELL PROPERTY MANAGEMENT  
401 MAPLEWOOD DR SUITE 23  
JUPITER, FL 33458 US**FEI Number:** 20-8440284**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAMPBELL PROPERTY MANAGEMENT  
C/O CAMPBELL PROPERTY MANAGEMENT  
401 MAPLEWOOD DR SUITE 23  
JUPITER, FL 33458 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:** PAM REMBAUM

03/29/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           CHENETTE, WILLIAM  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  401 MAPLEWOOD DR SUITE 23  
City-State-Zip: JUPITER FL 33458

Title            VP  
Name           TOPPING, SAM  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  401 MAPLEWOOD DR SUITE 23  
City-State-Zip: JUPITER FL 33458

Title            VP  
Name           VAZ, MARIE  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  401 MAPLEWOOD DR SUITE 23  
City-State-Zip: JUPITER FL 33458

Title            SECRETARY  
Name           TURNER, VICTORIA  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  401 MAPLEWOOD DR SUITE 23  
City-State-Zip: JUPITER FL 33458

Title            TREASURER  
Name           BURNS, SIMMIE  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  401 MAPLEWOOD DR SUITE 23  
City-State-Zip: JUPITER FL 33458

*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:** WILLIAM CHENETTE

PRESIDENT

03/29/2019

Electronic Signature of Signing Officer/Director Detail

Date