

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000346

Entity Name: MYAKKA SHORELANDS PRESERVATION ASSOCIATION, INC.**Current Principal Place of Business:**13986 ROYAL POINTE DR
PORT CHARLOTTE, FL 33953**Current Mailing Address:**1940 IDA COURT
THE VILLAGES, FL 32163 US**FEI Number: 46-3082396****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ANDREWS, DAVID G
1940 IDA COURT
THE VILLAGES, FL 32163 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 TREASURER
Name ANDREWS, DAVID G
Address 1940 IDA COURT
City-State-Zip: THE VILLAGES FL 32163

Title SECRETARY
Name WILKINSON, HAROLD
Address 13994 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

Title D
Name CARLSON, LARS
Address 14034 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

Title PRESIDENT
Name DEVOS, ALAN
Address 13970 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name BAZZY, DAVID
Address 14010 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name WALLACE, WILLIAM J
Address 14026 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name OCCHIPINTI, MARK
Address 14002 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name GRANT, MICHAEL J
Address 14018 ROYAL POINTE DR
City-State-Zip: PORT CHARLOTTE FL 33953

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: DAVID G ANDREWS**TREASURER****01/20/2020**

Electronic Signature of Signing Officer/Director Detail

Date