

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23240

Entity Name: MEADOW BROOK AT P.G.A. CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 27, 2021
Secretary of State
8627109577CC**Current Principal Place of Business:**14255 US HIGHWAY ONE
JUNO BEACH, FL 33408-1490**Current Mailing Address:**PO BOX 33405
PALM BEACH GARDENS, FL 33420 US**FEI Number: 65-0029733****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NAGLE, GARY
14255 US HIGHWAY ONE
JUNO BEACH, FL 33408-1490 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	Title	P
Name	YARVIS, STEPHEN	Name	NAGLE, GARY
Address	PO BOX 33405	Address	PO BOX 33405
City-State-Zip:	PALM BEACH GARDENS FL 33420	City-State-Zip:	PALM BEACH GARDENS FL 33420
Title	T, SECRETARY	Title	DIRECTOR
Name	GESTWA, ALEX	Name	BOON, PATRICIA
Address	PO BOX 33405	Address	PO BOX 33405
City-State-Zip:	PALM BEACH GARDENS FL 33420	City-State-Zip:	PALM BEACH GARDENS FL 33420
Title	DIRECTOR		
Name	HALL, LORAIN		
Address	PO BOX 33405		
City-State-Zip:	PALM BEACH GARDENS FL 33420		

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: GARY NAGLE**PRESIDENT****04/27/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date