

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34650

Entity Name: VILLAS NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

2 CAMINO DEL MAR
PALM COAST, FL 32137

Current Mailing Address:

POST OFFICE BOX 352266
PALM COAST, FL 32135 US

FEI Number: 59-2982569

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUTHERN STATES MANAGEMENT GROUP, INC.
2 CAMINO DEL MAR
PALM COAST, FL 32137 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 PD
Name ZEIGLER, PETER
Address POST OFFICE BOX 352266
City-State-Zip: PALM COAST FL 32135

Title SD
Name MCCLEAN, TIM
Address POST OFFICE BOX 352266
City-State-Zip: PALM COAST FL 32135

Title TD
Name KROLICKI, JANET
Address POST OFFICE BOX 352266
City-State-Zip: PALM COAST FL 32135

Title VPD
Name BALZARINI, JOHN
Address POST OFFICE BOX 352266
City-State-Zip: PALM COAST FL 32135

Title ASD
Name SECADES, FRANK
Address POST OFFICE BOX 352266
City-State-Zip: PALM COAST FL 32135

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: PETER ZEIGLER

PRESIDENT

04/24/2022

Electronic Signature of Signing Officer/Director Detail

Date