

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000003293

**Entity Name:** SAINT JOHNS NORTHWEST MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

12724 GRAN BAY PARKWAY  
SUITE 410  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

12724 GRAN BAY PARKWAY  
SUITE 410  
JACKSONVILLE, FL 32258 US

**FEI Number:** 59-3392622

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PROPERTY ADVISORS MANAGEMENT  
12724 GRAN BAY PARKWAY  
SUITE 410  
JACKSONVILLE, FL 32258 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:** WILLIAM HONAN

03/13/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CARLO, ARTHUR  
Address 12724 GRAN BAY PARKWAY  
SUITE 410  
City-State-Zip: JACKSONVILLE FL 32258

Title TREASURER  
Name GOLDEN, MARILYN  
Address 12724 GRAN BAY PARKWAY  
SUITE 410  
City-State-Zip: JACKSONVILLE FL 32258

Title DIRECTOR  
Name CAIN, HERB  
Address 12724 GRAN BAY PARKWAY  
SUITE 410  
City-State-Zip: JACKSONVILLE FL 32258

Title VP  
Name GRUNDY, LON  
Address 12724 GRAN BAY PARKWAY  
SUITE 410  
City-State-Zip: JACKSONVILLE FL 32258

Title SECRETARY  
Name SCHMITZ, MICHAEL  
Address 12724 GRAN BAY PARKWAY  
SUITE 410  
City-State-Zip: JACKSONVILLE FL 32258

*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:** ARTHUR CARLO

PRESIDENT

03/13/2024

Electronic Signature of Signing Officer/Director Detail

Date