## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005849

Entity Name: THE RESIDENCES AT WORLD GOLF VILLAGE CONDOMINIUM

ASSOCIATION, INC.

## **Current Principal Place of Business:**

414 OLD HARD ROAD

STE 502

FLEMING ISLAND, FL 32003

## **Current Mailing Address:**

C/O FLORIDIAN PROPERTY MANAGEMENT, LLC 414 OLD HARD ROAD, #502 FLEMING ISLAND, FL 32003 US

FEI Number: 59-3541311 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FLORIDIAN PROPERTY MANAGEMENT, LLC 414 OLD HARD ROAD SUITE 502 FLEMING ISLAND, FL 32003 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title VICE PRESIDENT Title **TREASURER** 

Name DAVIS, LEONARD Name NAUMANN, GEORGE

Address 414 OLD HARD ROAD, #502 Address 414 OLD HARD ROAD, #502

City-State-Zip: FLEMING ISLAND FL 32003 City-State-Zip: FLEMING ISLAND FL 32003

Title **DIRECTOR** Title **SECRETARY** 

Name GILMER, CATHERINE Name SIVULICH, KENNETH

Address 414 OLD HARD ROAD, #502 Address 414 OLD HARD ROAD, #502 FLEMING ISLAND FL 32003 City-State-Zip: City-State-Zip: FLEMING ISLAND FL 32003

Title **PRESIDENT** 

Name MCGINLEY, EDWARD 414 OLD HARD ROAD Address

STE 502

City-State-Zip: FLEMING ISLAND FL 32003

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.

Electronic Signature of Signing Officer/Director Detail

**FILED** Apr 09, 2019

Secretary of State

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