

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006583

Entity Name: THE VILLAGES REGIONAL MEDICAL CENTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3231 WEDGEWOOD LANE
THE VILLAGES, FL 32162

Current Mailing Address:

3231 WEDGEWOOD LANE
THE VILLAGES, FL 32162 US

FEI Number: 59-3550841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIVERSIFIED COMMERCIAL PROPERTY SERVICES
3231 WEDGEWOOD LANE
THE VILLAGES, FL 32162 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	P/D	Title	D/ST
Name	DZURO, MARTY	Name	MOFFETT, ALFRED HJR.
Address	1045 LAKE SUMTER LANDING	Address	610 E. DIXIE AVENUE
City-State-Zip:	THE VILLAGES FL 32162	City-State-Zip:	LEESBURG FL 34748
Title	D/VP		
Name	MAZE, JOHN		
Address	1451 EL CAMINO REAL		
City-State-Zip:	THE VILLAGES FL 32159		

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: MARTY DZURO

PRESIDENT

01/30/2018

Electronic Signature of Signing Officer/Director Detail

Date