

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749478

FILED
Jan 29, 2025
Secretary of State
6332829035CC

Entity Name: PIEDMONT "A" ASSOCIATION, INC.

Current Principal Place of Business:

C/O WILSON MANAGEMENT
1300 NW 17TH AVE SUITE 270
DELRAY BEACH, FL 33445

Current Mailing Address:

C/O WILSON MANAGEMENT
1300 NW 17TH AVE SUITE 270
DELRAY BEACH, FL 33445 US

FEI Number: 59-2029116

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DANNY
C/O WILSON LANDSCAPING & MANAGEMENT
1300 NW 17TH AVE, SUITE 270
DELRAY BEACH, FL 33445 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 TREASURER
Name PICOW, ALLAN
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

Title PRESIDENT
Name SIMON, ARTHUR
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

Title VICE-PRESIDENT
Name HIM, KATHLEEN
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

Title SECRETARY
Name DAVID, SUSAN
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name HATTEN, DOUGLAS
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name RITZAU, STEVE
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name FRIEDMAN, AILEEN
Address C/O WILSON MANAGEMENT
 1300 NW 17TH AVE SUITE 270
City-State-Zip: DELRAY BEACH FL 33445

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: KATHLEEN HIM

VICE-PRESIDENT

01/29/2025

Electronic Signature of Signing Officer/Director Detail

Date