## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749481** 

Entity Name: PIEDMONT "D" 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: 59-2039758 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILSON, DANNY L C/O WILSON 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

**FILED** Jan 24, 2025

**Secretary of State** 

1411148282CC

#### Officer/Director Detail:

Title VICE-PRESIDENT Title **PRESIDENT** 

GLANTZ, ROCHELLE Name Name SELZER, RICHARD

C/O WILSON MANAGEMENT C/O WILSON MANAGEMENT Address Address

1300 NW 17TH AVE. SUITE 270 1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title **SECRETARY** Title **TREASURER** 

Name COYLE, TIMOTHY Name CAVANAGH, DOROTHY GAIL

Address C/O WILSON MANAGEMENT Address C/O WILSON MANAGEMENT

1300 NW 17TH AVE. SUITE 270 1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 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.

01/24/2025 SIGNATURE: RICHARD SELZER **PRESIDENT**