

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705626

Entity Name: ALOHA KAI ASSOCIATION, INC.

Current Principal Place of Business:

6020 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

Current Mailing Address:

6020 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

FEI Number: 59-1035832

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAKACS, GARY J.
6344 ROOSEVELT BLVD.
CLEARWATER, FL 33760 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: GARY J. TAKACS

05/15/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DONNELLY, THOMAS
Address 2496 BANK STREET
 P.O. BOX 40010
City-State-Zip: OTTAWA ONTARIO KISOW 8

Title SECRETARY
Name NICHOLSON, LESLIE
Address 33 YORK STREET
City-State-Zip: LEXINGTON MA 02172

Title DIRECTOR
Name FOLEY, KRIS
Address 6020 MIDNIGHT PASS ROAD
City-State-Zip: SARASOTA FL 34242

Title VICE PRESIDENT AND TREASURER
Name TAKACS, GARY J.
Address 2667 SPYGLASS DRIVE
City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR
Name MUGLER, SHIRAR
Address 6020 MIDNIGHT PASS ROAD
City-State-Zip: SARASOTA FL 34242

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: KRIS FOLEY

DIRECTOR

05/15/2020

Electronic Signature of Signing Officer/Director Detail

Date