## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 707525** 

Entity Name: GREATER PINE ISLAND WATER ASSOCIATION,

**INCORPORATED** 

**Current Principal Place of Business:** 

5281 PINE ISLAND ROAD BOKEELIA, FL 33922

**Current Mailing Address:** 

5281 PINE ISLAND ROAD BOKEELIA, FL 33922

FEI Number: 59-1115303 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOKEELIA FL 33922

ADAMS, LAURIE J 5281 PINE ISLAND ROAD BOKEELIA, FL 33922 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: LAURIE ADAMS 02/28/2022

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT, DIRECTOR Title DIRECTOR

Name CAMMICK, JOHN Name KOOPMAN, JAMES Address 5281 PINE ISLAND ROAD Address 5281 PINE ISLAND RD City-State-Zip: **BOKEELIA FL 33922** City-State-Zip: BOKEELIA FL 33922

Title **DIRECTOR** Title DIRECTOR Name BROWN, PAUL Name VALCARCEL, ILA Address 5281 PINE ISLAND RD Address 5281 PINE ISLAND RD City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR, SECRETARY Title VP, DIRECTOR

Name POTTER, FRANK Name HALBLEIB, ROSS

Address 5281 PINE ISLAND ROAD Address 5281 PINE ISLAND ROAD

City-State-Zip: BOKEELIA FL 33922 City-State-Zip: **BOKEELIA FL 33922** 

Title **TREASURER** Title **DIRECTOR** Name ROSE, P MICHAEL Name DEILE, BILL

Address 5281 PINE ISLAND ROAD Address 5281 PINE ISLAND ROAD City-State-Zip: BOKEELIA FL 33922

**BOKEELIA FL 33922** City-State-Zip:

## Continues on page 2

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.

02/28/2022 SIGNATURE: JOHN CAMMICK **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Feb 28, 2022

Secretary of State

3415824188CC

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name DREIKORN, MICHAEL Name DEKKER, DENNIS

Address 5281 PINE ISLAND ROAD Address 5281 PINE ISLAND RD

City-State-Zip: BOKEELIA FL 33922 City-State-Zip: BOKEELIA FL 33922