

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707525

**FILED**  
**Feb 28, 2024**  
**Secretary of State**  
**2703572570CC**

**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:**

MAILLAKAKIS, MIKES  
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: MIKES MAILLAKAKIS**

**02/28/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           CAMMICK, JOHN  
Address       5281 PINE ISLAND ROAD  
City-State-Zip: BOKEELIA FL 33922

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

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

Title           SECRETARY  
Name           POTTER, FRANK  
Address       5281 PINE ISLAND ROAD  
City-State-Zip: BOKEELIA FL 33922

Title           VP  
Name           DEILE, BILL  
Address       5281 PINE ISLAND ROAD  
City-State-Zip: BOKEELIA FL 33922

Title           TREASURER  
Name           ROSE, P MICHAEL  
Address       5281 PINE ISLAND ROAD  
City-State-Zip: BOKEELIA FL 33922

Title           DIRECTOR  
Name           DREIKORN, MICHAEL  
Address       5281 PINE ISLAND ROAD  
City-State-Zip: BOKEELIA FL 33922

Title           DIRECTOR  
Name           DEKKER, DENNIS  
Address       5281 PINE ISLAND RD  
City-State-Zip: BOKEELIA FL 33922

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*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: JOHN CAMMICK**

**FINANCIAL OFFICER**

**02/28/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            FERGUSON, TOM  
Address        5281 PINE ISLAND ROAD  
City-State-Zip: BOKEELIA FL 33922