

2021 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: Yes****Name and Address of Current Registered Agent:**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****02/25/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title DIRECTOR
Name KOOPMAN, JAMES
Address 5281 PINE ISLAND RD
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 KUTNEY, LINDA
Address 5281 PINE ISLAND RD
City-State-Zip: BOKEELIA FL 33922

Title VP, DIRECTOR
Name HALBLEIB, ROSS
Address 5281 PINE ISLAND ROAD
City-State-Zip: BOKEELIA FL 33922

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

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

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

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.

SIGNATURE: JOHN CAMMICK**PRESIDENT, DIRECTOR****02/25/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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