

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713861

Entity Name: WHITNEY BEACH ASSOCIATION, INC.**Current Principal Place of Business:**

C/O LIGHTHOUSE PROPERTY MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
LONGBOAT KEY, FL 34228

Current Mailing Address:

C/O LIGHTHOUSE PROPERTY MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
LONGBOAT KEY, FL 34228 US

FEI Number: 59-1261947**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

LYONS, ROBERT
C/O LIGHTHOUSE PROPERTY MANAGEMENT
4134 GULF OF MEXICO DRIVE SUITE 203
LONGBOAT KEY, FL 34228 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: ROBERT LYONS

03/12/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LYONS, ROBERT
Address 4134 GULF OF MEXICO DRIVE
SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR
Name ALEXANDER, MARK
Address C/O LIGHTHOUSE PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title SECRETARY
Name BAUERNSCHMIDT, RICHARD
Address C/O LIGHTHOUSE PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title TREASURER
Name MALONI, RAYMOND
Address C/O LIGHTHOUSE PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR
Name TSCHANNEN, KEITH
Address C/O LIGHTHOUSE PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title VICE-PRESIDENT
Name CREWS, DENTON
Address C/O LIGHTHOUSE PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR
Name JASSOY, THOMAS
Address C/O LIGHTHOUSE PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR
Name KRUEGLE, HERMAN
Address C/O LIGHTHOUSES PROPERTY
MANAGEMENT
4134 GULF OF MEXICO DR. SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

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, the name of the 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: ROBERT LYONS

PRESIDENT

03/12/2019

Electronic Signature of Signing Officer/Director Detail

Date