

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720786

Entity Name: CHARLOTTE SHORES ONE PROPERTY OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**5259 GENESEE PKWY
BOKEELIA, FL 33922**Current Mailing Address:**PO BOX 320
BOKEELIA, FL 33922 US**FEI Number: 59-1823244****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DUNLAP, JOEL
5259 GENESEE PKWY
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: JOEL DUNLAP****01/21/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name DUNLAP, JOEL
Address 5259 GENESEE PKWY
City-State-Zip: BOKEELIA FL 33922

Title VP
Name CAPTON, WARREN DAVID
Address PO BOX 320
City-State-Zip: BOKEELIA FL 33922

Title SEC
Name NIBLOCK, CAROLYN
Address PO BOX 320
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR
Name HANSEN, ROBERT
Address PO BOX 320
City-State-Zip: BOKEELIA FL 33922

Title DIR
Name ZANE, STEPHEN A JR.
Address PO BOX 320
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR
Name WOLFREY, LARRY
Address PO BOX 320
City-State-Zip: BOKEELIA FL 33922

Title TRES
Name GALPIN, GWEN
Address PO BOX 320
City-State-Zip: BOKEELIA FL 33922

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: DUNLAP JOEL**PRESIDENT****01/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date