

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722499

Entity Name: GULF PINES PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**711 TARPON BAY RD
SANIBEL, FL 33957**Current Mailing Address:**C/O ISLAND MANAGEMENT
PO BOX 100
SANIBEL, FL 33957 US**FEI Number:** 59-1803734**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LODWICK, STEPHEN
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 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:** STEPHEN LODWICK

04/26/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	WIDMAN, RICHARD
Address	711 TARPON BAY RD
City-State-Zip:	SANIBEL FL 33957

Title	VP
Name	WINANS, SANDRA
Address	711 TARPON BAY RD
City-State-Zip:	SANIBEL FL 33957

Title	PRESIDENT
Name	NERING, DOUGLAS
Address	711 TARPON BAY RD
City-State-Zip:	SANIBEL FL 33957

Title	SECRETARY
Name	BRISBANE, ARTHUR
Address	711 TARPON BAY RD
City-State-Zip:	SANIBEL FL 33957

Title	DIRECTOR
Name	DAWLEY, DIAN
Address	711 TARPON BAY RD
City-State-Zip:	SANIBEL FL 33957

Title	TREASURER
Name	EVANS, JOSEPH
Address	711 TARPON BAY RD
City-State-Zip:	SANIBEL FL 33957

Title	DIRECTOR
Name	MACKINNON, JOHN
Address	711 TARPON BAY ROAD
City-State-Zip:	SANIBEL FL 33957

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: DOUGLAS NERING

PRESIDENT

04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date