### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 724620** 

Entity Name: SEA WINDS OWNERS ASSOCIATION, INC.

FILED
Apr 05, 2021
Secretary of State
5851694628CC

# **Current Principal Place of Business:**

SEAWINDS CONDOMINIUM 6703 MIDNIGHT PASS RD SARASOTA, FL 34242

# **Current Mailing Address:**

4370 S TAMIAMI TRL #102

SARASOTA, FL 34231 US

FEI Number: 59-1631034 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CASEY MANAGEMENT 4370 S TAMIAMI TRL #102

SARASOTA, FL 34231 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: BRIDGET SPENCE 04/05/2021

Electronic Signature of Registered Agent Date

Title

**TREASURER** 

## Officer/Director Detail:

Title

Name	MICHELETTI, JULIE	Name	PEDIGO, GENO
Address	4370 S TAMIAMI TRL #102	Address	4370 S TAMIAMI TRL #102
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34231
Title	P	Title	VP
Name	HEINZ, CINDY	Name	STRAKA, JAY
Address	4370 S TAMIAMI TRL #102	Address	4370 S TAMIAMI TRL #102
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34231
Title	DIRECTOR	Title	ASST. SECRETARY
Name	ULREY, RICHARD	Name	SPENCE, BRIDGET
Address	4370 S TAMIAMI TRL #102	Address	4370 S TAMIAMI TRL #102
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34231

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.