2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 726199** 

Entity Name: CARD SOUND GOLF CLUB, INC.

### **Current Principal Place of Business:**

100 COUNTRY CLUB DR. OCEAN REEF CLUB KEY LARGO, FL 33037

### **Current Mailing Address:**

100 COUNTRY CLUB DR. OCEAN REEF CLUB KEY LARGO, FL 33037

### FEI Number: 59-1507550

## Name and Address of Current Registered Agent:

HOLMES, TERESA 63 PUMPKIN CAY RD UNIT B KEY LARGO, FL 33037 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	: TERESA HOLMES			03/26/2024
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	TRUSTEE	Title	VP	
Name	WEILAND, JOHN	Name	DI NAPOLI, DOMINIC	
Address	15 CHANNEL CAY RD	Address	4 KNOLL LN	
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037	
Title	TRUSTEE	Title	TRUSTEE	
Name	COSTAS, JOHN	Name	COPELAND, DARRYL	
Address	24 DOCKSIDE LN #454	Address	22 HARBOR ISLAND DRIVE	
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037	
Title	TRUSTEE	Title	TREASURER	
Name	HUTCHINS, MICHAEL ANN	Name	HARTMANN, WILLIAM L	
Address	9 CHANNEL CAY	Address	24 DILLY TREE PK	
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037	
Title	TRUSTEE	Title	SECRETARY	
Name	VANDENBERG, BRADLEY E	Name	HOLMES, TERESA	
Address	24 DOCKSIDE LN #193	Address	37 HALFWAY ROAD	
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037	

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**REGISTERED AGENT** 

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: TERESA HOLMES

Electronic Signature of Signing Officer/Director Detail

## Certificate of Status Desired: No

Secretary of State 1532038506CC

FILED Mar 26, 2024

> 03/26/2024 Date

#### **Officer/Director Detail Continued :**

Title	TRUSTEE	Title	VP
Name	JONES, MICHAEL E	Name	MANZO, CINDY
Address	24 DOCKSIDE LN #123	Address	8 HARDWOOD HAMMOCK DR
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037
Title	TRUSTEE	Title	TRUSTEE
Title Name	TRUSTEE JOHN , GIBSON W	Title Name	TRUSTEE CONNELLY, JOHN T
Name	JOHN , GIBSON W	Name	CONNELLY, JOHN T