

2020 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

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANZO, CINDY
24 DOCKSIDE LN #209
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: CINDY MANZO

03/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRUSTEE
Name WEILAND, JOHN
Address 15 CHANNEL CAY RD
City-State-Zip: KEY LARGO FL 33037

Title TRUSTEE
Name DI NAPOLI, DOMINIC
Address 4 KNOLL LN
City-State-Zip: KEY LARGO FL 33037

Title TRUSTEE
Name SULLIVAN, MICHAEL J
Address 24 DOCKSIDE LN #508
City-State-Zip: KEY LARGO FL 33037

Title TREASURER
Name BRAND, S RICHARD
Address 19 SAIL POINT LN
City-State-Zip: KEY LARGO FL 33037

Title PRESIDENT
Name LEGG, WILLIAM M
Address 17 CARD SOUND ROAD
City-State-Zip: KEY LARGO FL 33037

Title TRUSTEE
Name COSTAS, JOHN
Address 24 DOCKSIDE LN #454
City-State-Zip: KEY LARGO FL 33037

Title TRUSTEE
Name KARL, KENNETH J
Address 24 DOCKSIDE LN #446
City-State-Zip: KEY LARGO FL 33037

Title TRUSTEE
Name MARCIA, MARTELL
Address 23 SUNSET CAY RD
City-State-Zip: KEY LARGO FL 33037

Continues on page 2

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: MICHAEL J. SULLIVAN

RA

03/30/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name PATTY, DAVIDSON
Address 7 CINNAMON BARK LN
City-State-Zip: KEY LARGO FL 33037

Title TRUSTEE
Name LARKIN, MARY ANN
Address 24 DOCKSIDE LN #412
City-State-Zip: KEY LARGO FL 33037

Title ASST. TREASURER
Name HARTMANN, WILLIAM L
Address 24 DILLY TREE PK
City-State-Zip: KEY LARGO FL 33037