

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728937

**Entity Name:** SAND CASTLE I ASSOCIATION, INC.

**Current Principal Place of Business:**

20000 GULF BLVD.  
INDIAN SHORES, FL 33785

**Current Mailing Address:**

C/O RICHARD C. COMMONS, P.A.  
901 N HERCULES AVENUE SUITE A  
CLEARWATER, FL 33765

**FEI Number:** 59-1561279

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COMMONS, RICHARD CPA  
901 NORTH HERCULES AVENUE  
SUITE A  
CLEARWATER, FL 33765 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name STOUT, KENT  
Address 6 SHERBURNE ROAD  
City-State-Zip: WETBOROUGH MA 01581

Title PRESIDENT  
Name BOZA, GERALD  
Address 9902 LONE TREE LANE  
City-State-Zip: TAMPA FL 33618

Title DIRECTOR  
Name CRAIG, IAN  
Address 2293 BARRISTER PLACE OAKVILLE  
ONTARIO CANADA L6M 3C4  
City-State-Zip: OAKVILLE OC

Title DIRECTOR  
Name FORD, DOUGLAS  
Address 6222 IROQUOIS COURT  
City-State-Zip: ODESSA FL 33556

Title TREASURER  
Name REEVES, LENORE  
Address 15 GRISTMILL DRIVE  
City-State-Zip: STAFFORD VA 22554

Title DIRECTOR  
Name WISSMAN, DIANE  
Address 14025 YACHT CLUB BLVD  
City-State-Zip: SEMINOLE FL 33776

*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:** GERALD BOZA

**PRESIDENT**

**04/17/2024**

Electronic Signature of Signing Officer/Director Detail

Date