| 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.                                                                                                                                     |  |

PRESIDENT

SIGNATURE: MARY MCGARVEY

I

City-State-Zip: ROCKLEDGE FL 32955

Electronic Signature of Signing Officer/Director Detail

| The above name  | d entity submits this statement for the purpose of changing its r | egistered office or regis | tered agent, or both, in the State of F |
|-----------------|-------------------------------------------------------------------|---------------------------|-----------------------------------------|
| SIGNATURE       | E: VAN C. MOORE                                                   |                           |                                         |
|                 | Electronic Signature of Registered Agent                          |                           |                                         |
| Officer/Dire    | ctor Detail :                                                     |                           |                                         |
| Title           | PRESIDENT                                                         | Title                     | TREASURER                               |
| Name            | MCGARVEY, MARY                                                    | Name                      | SEIB, JON                               |
| Address         | 1978 US HWY 1<br>STE 106                                          | Address                   | 1978 US HWY 1<br>STE 106                |
| City-State-Zip: | ROCKLEDGE FL 32955                                                | City-State-Zip:           | ROCKLEDGE FL 32955                      |
| Title           | DIRECTOR                                                          | Title                     | VP                                      |
| Name            | THORNTON, JANE                                                    | Name                      | DEROVEN, JEFFREY                        |
| Address         | 1978 US HWY 1<br>STE 106                                          | Address                   | 1978 US HWY 1<br>STE 106                |
| City-State-Zip: | ROCKLEDGE FL 32955                                                | City-State-Zip:           | ROCKLEDGE FL 32955                      |
| Title           | SECRETARY                                                         |                           |                                         |
| Name            | WOODSIDE, JEFF                                                    |                           |                                         |
| Address         | 1978 US HWY 1<br>STE 106                                          |                           |                                         |

### FEI Number: 59-1861699

### Name and Address of Current Registered Agent:

ADVANCED PROPERTY MANAGEMENT 1978 US HWY 1 STE 106 ROCKLEDGE, FL 32955 US

1978 US HWY 1

1978 US HWY 1 **STE 106** ROCKLEDGE, FL 32955 US

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# 741002

Entity Name: BUCCANEER BEACH CLUB CONDOMINIUM ASSOCIATION INC.

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

STE 106 ROCKLEDGE, FL 32955

## **Current Mailing Address:**

FILED Jan 22, 2024 Secretary of State 9310773523CC

Certificate of Status Desired: No

01/22/2024

01/22/2024 Date