

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741806

Entity Name: MANGROVE BAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**9240 MIDNIGHT PASS RD.
UNIT B
SARASOTA, FL 34242**Current Mailing Address:**9240 MIDNIGHT PASS RD.
UNIT B
SARASOTA, FL 34242 US**FEI Number:** 81-1764037**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEUMANN, STELLA LYNN
9240 MIDNIGHT PASS ROAD UNIT B
SARASOTA, FL 34242 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:** STELLA LYNN NEUMANN

02/09/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NEUMANN, STELLA LYNN
Address 9240 MIDNIGHT PASS RD.
 UNIT B
City-State-Zip: SARASOTA FL 34242

Title VP
Name POZANEK, JODI
Address 9240 MIDNIGHT PASS RD. UNIT D
City-State-Zip: SARASOTA FL 34242

Title TREASURER
Name BARNES, STEVEN LEWIS
Address 9240 MIDNIGHT PASS RD. UNIT A
City-State-Zip: SARASOTA FL 34242

Title ASST. TREASURER
Name HAMILTON, RAFFIE
Address 9240 MIDNIGHT PASS RD. UNIT A
City-State-Zip: SARASOTA FL 34242

Title S
Name FONG, SUZANNE
Address 9240 MIDNIGHT PASS RD UNIT C
City-State-Zip: SARASOTA FL 34242

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: RAFFIE HAMILTON

TREAS.

02/09/2022

Electronic Signature of Signing Officer/Director Detail

Date