

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744753

Entity Name: LONGSHOREMEN OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business:

503 NORTH 7TH STREET
FORT PIERCE, FL 34950-8229

Current Mailing Address:

503 NORTH 7TH STREET
FORT PIERCE, FL 34950-8229 US

FEI Number: 59-1685042

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS, RICHARD
503 NORTH 7TH STREET
FORT PIERCE, FL 34950 US

FILED
Apr 18, 2023
Secretary of State
0642878166CC

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: RICHARD ROSS

04/18/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ROSS, RICHARD
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950

Title VP
Name DAWSEY, GEORGE
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950

Title FINANCIAL SECRETARY,
TREASURER, DISPATCHER
Name BELEZAIR, DENNIS
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

Title RECORDING SECRETARY
Name JONES, TRINERE
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

Title TRUSTEE
Name ALEXANDER, MALCOLM
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

Title TRUSTEE
Name BELEZAIR, RODNEY
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

Title TRUSTEE
Name DEMONTEGAG, RODRICK
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

Title CHAIRMAN
Name GREEN, RONALD
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

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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: RICHARD ROSS

PD

04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAPLAN
Name PLOWDEN, VIVIAN
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229

Title TRUSTEE
Name JACKSON, GENE
Address 503 NORTH 7TH STREET
City-State-Zip: FORT PIERCE FL 34950-8229