

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759338

Entity Name: SANDY SHORES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**9887 4TH STREET NORTH
SUITE 301
SAINT PETERSBURG, FL 33702**Current Mailing Address:**C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 301
SAINT PETERSBURG, FL 33702 US**FEI Number:** 59-1982224**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ASSOCIA GULF COAST
9887 4TH STREET NORTH
SUITE 301
SAINT PETERSBURG, FL 33702 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:** JOHN HENSLEY

06/24/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name VARLEY, CHRIS
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title TREASURER
Name SANCRAINT, CHAD
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name MCGOWAN, CRYSTAL
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIR
Name HORWITZ, GREGG
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title VP
Name GAMMARIELLO, MARY
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title SECRETARY
Name RODIS, JANE
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name O'NEILL, FRAN
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

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: CHRIS VARLEY

PRESIDENT

06/24/2020

Electronic Signature of Signing Officer/Director Detail

Date