2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762619

Entity Name: COMMUNITY OFFICERS ASSOCIATION OF SINGER ISLAND,

INC.

FILED
Mar 18, 2025
Secretary of State
7515172913CC

Current Principal Place of Business:

4100 NORTH OCEAN DRIVE, #501 SINGER ISLAND, FL 33404

Current Mailing Address:

1287 BLUE HERON BLVD

STE: 25

RIVIERA BEACH, FL 33404 US

FEI Number: 65-0044011 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SLOSER, MICHAEL E 4100 NORTH OCEAN DRIVE, #501 SINGER ISLAND, FL 33404 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: MICHAEL E SLOSER 03/18/2025

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Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title VP

NameSLOSER, MICHAEL ENameCONTOLE, WILLIAM ESQ.Address4100 NORTH OCEAN DRIVE, #501Address1030 GRAND BAHAMA LNCity-State-Zip:SINGER ISLAND FL 33404City-State-Zip:SINGER ISLAND FL 33404

Title SECRETARY Title TREASURER

Name MURPHY, JOYCE Name MCGAHRAN, KATHLEEN

Address 145 S. OCEAN AVENUE Address 125 S OCEAN AVE

City-State-Zip: PALM BEACH SHORES FL 33404 City-State-Zip: PALM BEACH SHORES FL 33404

Title DIRECTOR Title DIRECTOR

NameZIPERN, MARTINNameJAMESON, WILLIAMAddress5080 N. OCEAN DRIVEAddress5080 N. OCEAN DRIVECity-State-Zip:RIVIERA BEACH FL 33404City-State-Zip:RIVIERA BEACH FL 33404

Title DIRECTOR

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Name BOTEL, JULIE DR.

Address 3000 N OCEAN DR

APT 21B

City-State-Zip: RIVIERA BEACH FL 33404

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: KATHLEEN MCGAHRAN TREASURER 03/18/2025