DOCUMENT# 769065
Entity Name: AQUARINA COMMUNITY SERVICES ASSOCIATION, INC.

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Current Principal Place of Business:

450 AQUARINA BLVD. MELBOURNE BEACH, FL 32951

REPORT

Current Mailing Address:

450 AQUARINA BLVD. MELBOURNE BEACH, FL 32951

FEI Number: 59-2378001

Name and Address of Current Registered Agent:

REZANKA, KIMBERLY ESQ. 96 WILLARD STREET SUITE 302 COCOA, FL 32922 US Certificate of Status Desired: No

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	: KIMBERLY REZANKA, ESQ.		04/23/2018
	Electronic Signature of Registered Agent		Date
Officer/Dired	ctor Detail :		
Title	VP	Title	PRESIDENT
Name	BRUNS, ANN	Name	POLLOCK, PATRICK
Address	863 AQUARINA BLVD	Address	140 WARSTEINER WAY #304
City-State-Zip:	MELBOURNE BEACH FL 32951	City-State-Zip:	MELBOURNE BEACH FL 32951
Title	SECRETARY	Title	TREASURER
Name	MILLER, JOHN	Name	HELMER, DALE
Address	214 OSPREY VILLAS COURT	Address	130 WARSTEINER WAY #401
City-State-Zip:	MELBOURNE BEACH FL 32951	City-State-Zip:	MELBOURNE BEACH FL 32951
Title	DIRECTOR	Title	DIRECTOR
Name	MCRAE, NANCY	Name	CAPPS, STEWART
Address	354 AQUARINA BLVD	Address	320 HAMMOCK SHORE DRIVE
City-State-Zip:	MELBOURNE BEACH FL 32951	City-State-Zip:	MELBOURNE BEACH FL 32951
Title	DIRECTOR		
Name	BAKER, DAVID		
Address	202 OSPREY VILLAS CT		
City-State-Zip:	MELBOURNE BEACH FL 32951		

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: JOHN MILLER

SECRETARY

04/23/2018

Electronic Signature of Signing Officer/Director Detail