2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769065

Entity Name: AQUARINA COMMUNITY SERVICES ASSOCIATION, INC.

FILED
Apr 28, 2014
Secretary of State
CC8110862980

Current Principal Place of Business:

450 AQUARINA BLVD.

MELBOURNE BEACH, FL 32951

Current Mailing Address:

450 AQUARINA BLVD.

MELBOURNE BEACH. FL 32951

FEI Number: 59-2378001 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC 8240 DEVEREAUX DRIVE SUITE 100 VIERA, FL 32940 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:

Electronic Signature of Registered Agent

Date

DIRECTOR

Officer/Director Detail:

Title VP, TREASURER Title

Name GEACH, RICHARD Name MUENDEL, EDMUND

Address 290 HAMMOCK SHORE DRIVE Address 360 HAMMOCK SHORE DRIVE

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

Title SECRETARY Title DIRECTOR

NameRISE, HARLANNameGRAHAM, WILLIAMAddress845 AQUARINA BLVDAddress869 AQUARINA BLVD

City-State-Zip: MELBOURNE FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR Title DIRECTOR

Name ASCHMAN, RICHARD Name THORESEN, ORNULF
Address 140 WARSTEINER WAY #502 Address 814 SQUARINA BLVD

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

Title PRESIDENT
Name LESLIE. WILLIAM

Address 202 OSPREY VILLAS COURT
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: HARLAN RISE SECRETARY 04/28/2014