

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769065

Entity Name: AQUARINA COMMUNITY SERVICES ASSOCIATION, INC.

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: Yes

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
7380 MURRELL ROAD
SUITE 200
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

Officer/Director Detail :

Title VP
Name BRUNS, ANN
Address 863 AQUARINA BLVD
City-State-Zip: MELBOURNE BEACH FL 32951

Title PRESIDENT
Name POLLOCK, PATRICK
Address 140 WARSTEINER WAY #304
City-State-Zip: MELBOURNE BEACH FL 32951

Title SECRETARY
Name MILLER, JOHN
Address 214 OSPREY VILLAS COURT
City-State-Zip: MELBOURNE BEACH FL 32951

Title TREASURER
Name HELMER, DALE
Address 130 WARSTEINER WAY #401
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name MILLER, JAYNE
Address 7697 KIAWAH WAY
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name CAPP, STEWART
Address 320 HAMMOCK SHORE DRIVE
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name POSITION, VACANT
Address 450 AQUARINA BLVD
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: PATRICK POLLOCK

PRESIDENT

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date