

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005118

Entity Name: ANASTASIA DUNES ASSOCIATION, INC.

Current Principal Place of Business:

5455 A1A SOUTH
ST. AUGUSTINE, FL 32080

Current Mailing Address:

5455 A1A SOUTH
ST. AUGUSTINE, FL 32080 US

FEI Number: 59-3743795

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC
5455 A1A SOUTH
ST. AUGUSTINE, FL 32080 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 PRESIDENT
Name LANG, DAN S
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR
Name SPEARS, DAN
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title SECRETARY
Name MURPHY, KEN B
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title VP
Name TABB, TIFFANY
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title TREASURER
Name NOLAND, RICK
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR
Name MASSICOTE, JULIE
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR
Name MILITELLO, PINO
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

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: RICK NOLAND

TREASURER

04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date