

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000001710

**Entity Name:** PALMETTO BAY BUSINESS ASSOCIATION, INC.

**FILED**  
**Apr 07, 2023**  
**Secretary of State**  
**8234366178CC**

**Current Principal Place of Business:**

18001 OLD CUTLER RD  
STE 421  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

P O BOX 56 2766  
MIAMI, FL 33256-2766 US

**FEI Number: 20-0670185**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

HETENYI, MARCELL CPA  
18001 OLD CUTLER RD  
STE 421  
PALMETTO BAY, FL 33157 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: MARCELL HETENYI**

**04/07/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MOURINO , TAMARA  
Address        18001 OLD CUTLER RD  
                  STE 421  
City-State-Zip: PALMETTO BAY FL 33157  
  
Title            TREASURER  
Name            EUBANKS, JOHN  
Address        18001 OLD CUTLER RD  
                  STE 421  
City-State-Zip: PALMETTO BAY FL 33157

Title            TREASURER  
Name            MARCELL, HETENYI P  
Address        18001 OLD CUTLER RD  
                  STE 421  
City-State-Zip: PALMETTO BAY FL 33157  
  
Title            VP  
Name            ARCIA , EMILY  
Address        18001 OLD CUTLER RD  
                  STE 421  
City-State-Zip: PALMETTO BAY FL 33157

*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: EMILY ARCIA**

**VP**

**04/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date