

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03233

**Entity Name:** SECTION 23, PROPERTY OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

26217 RAMPART BLVD.  
PUNTA GORDA, FL 33983

**Current Mailing Address:**

26217 RAMPART BLVD.  
PUNTA GORDA, FL 33983 US

**FEI Number:** 59-2441507

**Certificate of Status Desired:** Yes

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

OAKS, DAVID K  
407 E. MARION STREET, SUITE 101  
PUNTA GORDA, FL 33950 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            MURPHY, PAULA  
Address        1108 NAVIGATOR ROAD  
City-State-Zip: PUNTA GORDA FL 33983

Title            VP  
Name            HARRIS, GERALD  
Address        26007 NORTHERN CROSS RD  
City-State-Zip: PUNTA GORDA FL 33983

Title            TREASURER  
Name            SMITH, CATHERINE  
Address        2246 BENGAL CT  
City-State-Zip: PUNTA GORDA FL 33983

Title            DIRECTOR  
Name            RICHMAN, BRUCE R  
Address        2206 MAURITANIA  
City-State-Zip: PUNTA GORDA FL 33983

Title            SECRETARY  
Name            SMITH, JENNIFER D  
Address        1169 RIO DE JANEIRO  
City-State-Zip: PUNTA GORDA FL 33983

Title            DIRECTOR  
Name            RICHTER, FRANK T  
Address        2151 ULSTER  
City-State-Zip: PUNTA GORDA FL 33983

Title            DIRECTOR  
Name            JEFFERSON, GAYLE L  
Address        1476 VERMOUTH  
City-State-Zip: PUNTA GORDA FL 33983

*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:** PAULA MURPHY

**BOARD PRESIDENT**

**02/09/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date