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

DOCUMENT# N0400003868

Entity Name: TREASURE CAY COMMUNITY FOUNDATION, INC.

FILED Feb 06, 2024 Secretary of State 3032651228CC

### **Current Principal Place of Business:**

4179 CORTE LA VISTA SARASOTA, FL 34238

## **Current Mailing Address:**

4179 CORTE LA VISTA SARASOTA, FL 34238 US

FEI Number: 20-1411118 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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	VC	Title	VICE CHAIR
Name	RHONDA MCCOLLOUGH	Name	FAY, SHAWN

Address 4179 CORTE LA VISTA Address 4179 CORTE LA VISTA
City-State-Zip: SARASOTA FL 34238 City-State-Zip: SARASOTA FL 34238

Title DIRECTOR Title **TREASURER** Name NEWELL, CINDY JEWETT, TOM Name Address 4179 CORTE LA VISTA Address 4179 CORTE LA VISTA SARASOTA FL 34238 City-State-Zip: City-State-Zip: SARASOTA FL 34238

Title DIRECTOR Title DIRECTOR

Name KERTLAND, KIM Name FAY, SHAWN

Address 4179 CORTE LA VISTA Address 3918 WILSHIRE DRIVE
City-State-Zip: SARASOTA FL 34238 City-State-Zip: SARASOTA FL 34238

Title SECRETARY Title CHAIRMAN

NameBAKER, MICHELLENameMARTINSON, PAMAddress4179 CORTE LA VISTAAddress4179 CORTE LA VISTACity-State-Zip:SARASOTA FL 34238City-State-Zip:SARASOTA FL 34238

# Continues on page 2

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: RHONDA MCCOLLOUGH

VICE CHAIR

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name SMITH, ANN

Address 4179 CORTE LA VISTA

City-State-Zip: SARASOTA FL 34238

Title DIRECTOR

Address

Name MCCLEAN, BILL

City-State-Zip: SARASOTA FL 34238

4179 CORTE LA VISTA

Title DIRECTOR

Name COLASUONNO, JOE

Address 4179 CORTE LA VISTA

City-State-Zip: SARASOTA FL 34238