2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003868

Entity Name: TREASURE CAY COMMUNITY FOUNDATION, INC.

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

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	CHAIRMAN	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	TREASURER	Title	DIRECTOR
Name	TAYLOR, VALERIE	Name	NEWELL, CINDY
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	DIRECTOR
Title Name	DIRECTOR KERTLAND, KIM	Title Name	DIRECTOR TRETHEWAY, BARTON
Name	KERTLAND, KIM 4179 CORTE LA VISTA	Name	TRETHEWAY, BARTON 4179 CORTE LA VISTA
Name Address	KERTLAND, KIM 4179 CORTE LA VISTA	Name Address	TRETHEWAY, BARTON 4179 CORTE LA VISTA
Name Address City-State-Zip:	KERTLAND, KIM 4179 CORTE LA VISTA SARASOTA FL 34238	Name Address City-State-Zip:	TRETHEWAY, BARTON 4179 CORTE LA VISTA SARASOTA FL 34238
Name Address City-State-Zip: Title	KERTLAND, KIM 4179 CORTE LA VISTA SARASOTA FL 34238 DIRECTOR	Name Address City-State-Zip: Title	TRETHEWAY, BARTON 4179 CORTE LA VISTA SARASOTA FL 34238 SECRETARY
Name Address City-State-Zip: Title Name	KERTLAND, KIM 4179 CORTE LA VISTA SARASOTA FL 34238 DIRECTOR FAY, SHAWN 3918 WILSHIRE DRIVE	Name Address City-State-Zip: Title Name Address	TRETHEWAY, BARTON 4179 CORTE LA VISTA SARASOTA FL 34238 SECRETARY BAKER, MICHELLE

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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

CHAIR

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 12, 2023 Secretary of State 7165634274CC

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	MARTINSON, PAM	Name	SMITH, ANN
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	DIRECTOR
Title Name	DIRECTOR COLASUONNO, JOE	Title Name	DIRECTOR MCCLEAN, BILL
Name	COLASUONNO, JOE	Name	MCCLEAN, BILL