

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009685

Entity Name: SOUTHAMPTON PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O TRITON PROPERTY MANAGEMENT
900 E. INDIANTOWN ROAD SUITE 210
JUPITER, FL 33477**Current Mailing Address:**C/O TRITON PROPERTY MANAGEMENT
900 E. INDIANTOWN ROAD SUITE 210
JUPITER, FL 33477 US**FEI Number:** 65-1260695**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEVEN, BRATEN
250 SOUTH AUSTRALIAN AVENUE 5TH FLOOR
WEST PALM BEACH, FL 33401 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:** STEVEN BRATEN

01/17/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	SCHROTT , SUSANNE
Address	C/O TRITON PROPERTY MANAGEMENT 900 E. INDIANTOWN ROAD SUITE 210

City-State-Zip: JUPITER FL 33477

Title	TREASURER
Name	GREEN, LINDSEY
Address	C/O TRITON PROPERTY MANAGEMENT 900 E. INDIANTOWN ROAD SUITE 210

City-State-Zip: JUPITER FL 33477

Title	DIRECTOR
Name	MCKENZIE , THOMAS
Address	C/O TRITON PROPERTY MANAGEMENT 900 E. INDIANTOWN ROAD SUITE 210

City-State-Zip: JUPITER FL 33477

Title	VP
Name	RAFFA , LOUIS
Address	C/O TRITON PROPERTY MANAGEMENT 900 E. INDIANTOWN ROAD SUITE 210

City-State-Zip: JUPITER FL 33477

Title	SECRETARY
Name	BECKER , TARYN
Address	C/O TRITON PROPERTY MANAGEMENT 900 E. INDIANTOWN ROAD SUITE 210

City-State-Zip: JUPITER FL 33477

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: SUSANNE SCHROTT

PRESIDENT

01/17/2024

Electronic Signature of Signing Officer/Director Detail

Date