

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05799

Entity Name: SUNSET COVE AT CHOKOLOSKEE CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 29, 2023
Secretary of State
8615170317CC

Current Principal Place of Business:

STATE ROAD 29
CHOKOLOSKEE, FL 34138

Current Mailing Address:

FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 US

FEI Number: 65-0142134

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANKLY COASTAL FINANCIAL SERVICES LLC
FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 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: CLYDE F. PARRISH, JR.

04/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name PRAUGHT, BRAD
Address FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title SD
Name GRAVES, MARIE
Address FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title VPD
Name KASHUBA, JOSEPH
Address FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title D
Name ZABAVSKI, BRENDON
Address FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title TD
Name STACKER, JACK
Address FRANKLY COASTAL FINANCIAL SERVICES LLC
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

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: JOSEPH KASHUBA

VICE PRESIDENT

04/29/2023

Electronic Signature of Signing Officer/Director Detail

Date