

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008271

Entity Name: FLORIDA COASTAL CONSERVANCY, INC.

Current Principal Place of Business:

1001 10TH STREET
PORT SAINT JOE, FL 32456

Current Mailing Address:

P.O.BOX 611
PORT SAINT JOE, FL 32457 US

FEI Number: 45-3595834

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SWINDALL, JESSICA
817 MARVIN AVENUE
PORT SAINT JOE, FL 32456 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: JESSICA SWINDALL

02/08/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VC
Name EHRMAN, JOHN
Address 385 BLUE HERON DR
City-State-Zip: PORT ST JOE FL 32456

Title DIRECTOR
Name WAGNER, KIM
Address 610 N CANAL DR
City-State-Zip: PORT SAINT JOE FL 32456

Title DIRECTOR
Name RINEHART, JANNA
Address 1493 INDIAN PASS ROAD
City-State-Zip: PORT SAINT JOE FL 32456

Title TREASURER
Name WARHOL, MARIANNE
Address 5448 CAPE SAN BLAS ROAD
City-State-Zip: PORT ST. JOE FL 32456

Title PRESIDENT
Name SWINDALL, JESSICA
Address 817 MARVIN AVENUE
City-State-Zip: PORT ST. JOE FL 32456

Title DIRECTOR
Name EASTON, PENNY R
Address 144 BETTY DRIVE
City-State-Zip: PORT SAINT JOE FL 32456

Title DIRECTOR
Name LAYMAN, WILLIAM R
Address UNIT 604
City-State-Zip: PANAMA CITY BEACH FL 32408

Title SECRETARY
Name KEIGLEY, LOU
Address 423 GULF STREET
City-State-Zip: PORT ST. JOE FL 32456

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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: JESSICA E. SWINDALL

PRESIDENT

02/08/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name HYDE, DENISE

Address P.O.BOX 36

City-State-Zip: PORT ST JOE FL 32457