

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000007745

**Entity Name:** VISIT DUNEDIN, INC.**Current Principal Place of Business:**C/O VISITORS CENTER DUNEDIN CHAMBER  
301 MAIN ST.  
DUNEDIN, FL 34698**Current Mailing Address:**P.O. BOX 475  
DUNEDIN, FL 34697 US**FEI Number:** 46-3627734**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BOWMAN, AMANDA  
1940 SUMMIT DR.  
DUNEDIN, FL 34698 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:** AMANDA P BOWMAN

01/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title PRESIDENT  
Name ZUCKER, DAN  
Address PO BOX 2234  
City-State-Zip: DUNEDIN FL 34698Title DIRECTOR  
Name ZUCKER, DAN  
Address PO BOX 2234  
City-State-Zip: DUNEDIN FL 34698Title TREASURER  
Name MULLINS, GABRIELLA  
Address C/O HOLIDAY INN EXPRESS DUNEDIN  
975 BROADWAY  
City-State-Zip: DUNEDIN FL 34698Title SECRETARY  
Name BOWMAN, AMANDA  
Address 1940 SUMMIT DR.  
City-State-Zip: DUNEDIN FL 34698Title VP  
Name JOINES, STEPHANIE  
Address 25749 US 19 N SUITE 100  
City-State-Zip: CLEARWATER FL 33763

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:** AMANDA P BOWMAN**SECRETARY**

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date