## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000006183

Entity Name: CITIZENS FOR PONCE INLET, INC.

**Current Principal Place of Business:** 

4670 S. PENINSULA DR. N PONCE INLET. FL 32127

**Current Mailing Address:** 

4670 S. PENINSULA DR. N PONCE INLET, FL 32127 US

FEI Number: 47-1278535 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUGGINS, JUDITH A 44 COASTAL OAKS CIRCLE PONCE INLET, FL 32127 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:

Electronic Signature of Registered Agent

Date

FILED Apr 06, 2015

**Secretary of State** 

CC8760565257

Officer/Director Detail:

Title PRESIDENT Title VP

NameHINSON, JAMESNameREDINGER, MARYANNAddress4745 S. ATLANTIC AVENUEAddress139 ANCHOR DRIVECity-State-Zip:PONCE INLET FL 32127City-State-Zip:PONCE INLET FL 32127

Title SECRETARY Title T

Name GRISCOM, KATHY Name HUGGINS, JUDITH A

Address 69 CALUMET AVE Address 44 COASTAL OAKS CIRCLE
City-State-Zip: PONCE INLET FL 32127 City-State-Zip: PONCE INLET FL 32127

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: JUDITH HUGGINS

Electronic Signature of Signing Officer/Director Detail

**TREASURE** 

04/06/2015

Date