

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14761

**Entity Name:** THE SEA TURTLE PRESERVATION SOCIETY, INC.

**Current Principal Place of Business:**

111 S. MIRAMAR AVE.  
INDIALANTIC, FL 32903

**Current Mailing Address:**

111 S MIRAMAR AVE  
INDIALANTIC, FL 32903 US

**FEI Number:** 59-2856913

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SKINNER, SUSAN  
450 HARWOOD AVENUE  
SATELLITE BEACH, FL 32937 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:** SUSAN SKINNER

02/08/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name CHENEY, DAVE  
Address 485 LIMERICK DR  
City-State-Zip: MERRITT ISLAND FL 32953

Title TREASURER  
Name LEBRESCO, KATHLEEN  
Address 1394 PORT MALABAR BLVD NE  
City-State-Zip: PALM BAY FL 32905

Title DIRECTOR  
Name HUGHES, DORI  
Address PO BOX 034087  
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR  
Name PSZONOWSKY, ROGER  
Address 944 AIS ST SW  
City-State-Zip: PALM BAY FL 32908-4289

Title DIRECTOR  
Name KONKEL, CRAIG  
Address 359 MONTECITO  
City-State-Zip: SATELLITE BEACH FL 32937

Title DIRECTOR  
Name MAISTO, JACQUELINE  
Address 408 ROSEDALE DRIVE  
City-State-Zip: SATELLITE BEACH FL 32937

Title DIRECTOR  
Name VILLANUEVA, NOELLE  
Address 105 CORTEZ DRIVE  
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR  
Name AUD, REBECCA JO  
Address 205 S BANANA RIVER DRIVE  
#403  
City-State-Zip: COCOA BEACH FL 32931

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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:** KATHLEEN LEBRESCO

TREASURER

02/08/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR, CHAIRMAN  
Name           SKINNER, SUSAN G  
Address        450 HARWOOD AVENUE  
City-State-Zip: SATELLITE BEACH FL 32937

Title           DIRECTOR  
Name           BAKER, KRISANE LEA  
Address        3528 REIGN ST  
City-State-Zip: MELBOURNE FL 32934

Title           SECRETARY  
Name           LITTLETON, LISA K  
Address        5201 OCEAN BEACH BLVD  
                  #21  
City-State-Zip: COCOA BEACH FL 32931