2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPO	RT

DOCUMENT# N14761

Entity Name: THE SEA TURTLE PRESERVATION SOCIETY, INC.

Current Principal Place of Business:

111 S. MIRAMAR AVE. INDIALTANTIC, FL 32903

Current Mailing Address:

PO BOX 510988 MELBORNE BCH, FL 32951-0988 US

FEI Number: 59-2856913

Name and Address of Current Registered Agent:

OPENSHAW, VICKIE 2875 N HIGHWAY A1A UNIT #405 INDIALANTIC, FL 32903 US FILED Apr 28, 2017 Secretary of State CC5649304976

Certificate of Status Desired: No

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	: VICKIE OPENSHAW			04/28/2017				
	Electronic Signature of Registered Agent			Date				
Officer/Director Detail :								
Title	DIRECTOR	Title	DIRECTOR					
Name	ULLMER, CINDY	Name	CHENEY, DAVE					
Address	201 DELAND AVE	Address	485 LIMERICK DR					
City-State-Zip:	INDIALANTIC FL 32903	City-State-Zip:	MERRITT ISLAND FL 32953					
Title	TREASURER	Title	DIRECTOR					
Name	LEBRESCO, KATHLEEN	Name	HUGHES, DORI					
Address	1394 PORT MALABAR BLVD NE	Address	PO BOX 034087					
City-State-Zip:	PALM BAY FL 32905	City-State-Zip:	INDIALANTIC FL 32903					
Title	DIRECTOR	Title	CHAIRMAN/SECRETARY					
Name	PSZONOWSKY, ROGER	Name	OPENSHAW, VICKIE					
Address	944 AIS ST SW	Address	2875 N HIGHWAY A1A UNIT #405					
City-State-Zip:	PALM BAY FL 32908	City-State-Zip:	INDIALANTIC FL 32903					
Title Name	DIRECTOR KONKEL, CRAIG	Title Name	DIRECTOR RICE, NIKIA					
Address City-State-Zip:	359 MONTECITO SATELLITE BEACH FL 32937	Address City-State-Zip:	2116 DRYDEN COURT					

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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

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	PEPE-DILLON, HEATHER	Name	MATTHEWS, JO-ELLEN
Address	702 BONNIE CIRCLE	Address	465 SANDERLING DRIVE
City-State-Zip:	MELBOURNE FL 32901	City-State-Zip:	INDIALANTIC FL 32903