2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE SEA TURTLE PRESERVATION SOCIETY, INC.

Current Principal Place of Business:

111 S. MIRAMAR AVE. INDIALTANTIC, FL 32903

Current Mailing Address:

111 S MIRAMAR AVE INDIALANTIC, FL 32903 US

FEI Number: 59-2856913

Name and Address of Current Registered Agent:

OPENSHAW, VICKIE 2875 N HIGHWAY A1A UNIT #405 INDIALANTIC, FL 32903 US 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			04/02/2018		
	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 Address City-State-Zip:	DIRECTOR KONKEL, CRAIG 359 MONTECITO SATELLITE BEACH FL 32937	Title Name Address City-State-Zip:	DIRECTOR RICE, NIKIA 2116 DRYDEN COURT MELBOURNE FL 32935			

Continues on page 2

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

04/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 02, 2018 Secretary of State CC4605860251

···· - -

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
Title	DIRECTOR	Title	DIRECTOR
Name	TOLSON, SARAH	Name	MAISTO, JACQUELINE
Address	1331 SAN CORTEZ AVE NE	Address	408 ROSEDALE DRIVE
City-State-Zip:	PALM BAY FL 32907	City-State-Zip:	SATELLITE BEACH FL 32937
Title	DIRECTOR		
Name	VILLANUEVA, NOELLE		
Address	105 CORTEZ DRIVE		

City-State-Zip: MELBOURNE BEACH FL 32951