

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

DOCUMENT# N16000008481

**Entity Name:** TREASURE COAST NINETY-NINES, INC.

**Current Principal Place of Business:**

11420 US HWY. 1, #155  
N. PALM BEACH, FL 33408

**Current Mailing Address:**

11420 US HWY. 1, #155  
N. PALM BEACH, FL 33408 US

**FEI Number: 81-3795104**

**Certificate of Status Desired: No**

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

JACOBS, JACOBS  
11420 US HWY. 1, #155  
N. PALM BEACH, FL 33408 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: RUTH JACOBS**

**03/19/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title MC  
Name JACOBS, RUTH  
Address 11420 US HWY. 1, #155  
City-State-Zip: N. PALM BEACH FL 33408

Title CHAIRMAN  
Name EBELT, KAYE  
Address 11420 US HWY. 1, #155  
City-State-Zip: N. PALM BEACH FL 33408

Title SECRETARY  
Name WENDT, SARAH  
Address 11420 US HWY. 1, #155  
City-State-Zip: N. PALM BEACH FL 33408

Title CHAIRMAN  
Name GALUS, EVELYN  
Address 11420 US HWY. 1, #155  
City-State-Zip: NORTH PALM BEACH FL 33408

Title TREASURER  
Name ARTMAN, DEBRA  
Address 11420 US HWY. 1, #155  
City-State-Zip: NORTH PALM BEACH FL 33408

*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: DEBRA ARTMAN**

**TREASURER**

**03/19/2021**

Electronic Signature of Signing Officer/Director Detail

Date