## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000005804

Entity Name: THE SANCTUARY OF THE TREASURE COAST, INC.

**FILED** Apr 12, 2022 **Secretary of State** 2322805485CC

## **Current Principal Place of Business:**

2226 SE PEAR LANE

PORT SAINT LUCIE, FLORIDA, FL 34952

## **Current Mailing Address:**

2226 SE PEAR LANE

PORT SAINT LUCIE, FLORIDA, FL 34952 US

FEI Number: 86-2885165 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

JONATHAN, RIX 2226 SE PEAR LANE

PORT SAINT LUCIE, FLORIDA, FL 34952 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

Officer/Director Detail :

Title **PRESIDENT** Title VΡ

PIXLEY, DONNA BLACK, JAMES C Name Name

2226 SE PEAR LANE Address Address 616 MARSH ISLE CIRCLE

APT. 206

**OFFICER** 

772 NW CARDINAL DRIVE

City-State-Zip: PORT SAINT LUCIE FL 34952 City-State-Zip: PORT SAINT LUCIE FL 34952

Title Т

Title Name SEBBEN, RON

Name MCVLLOY, KRISTINA Address 653 30TH AVENUE SW

2414 SW FALCON CIRCLE Address City-State-Zip: VERO BEACH FL 32968

City-State-Zip: PORT SAINT LUCIE FL 34953

Title

Address

Title **OFFICER** 

BUTLER, JOSEPH Name Name ASHLEY, PEGGY

Address 616 MARSH ISLE CIRCLE

APT. 206

City-State-Zip: PORT SAINT LUCIE FL 34983 City-State-Zip: PORT SAINT LUCIE FL 34983

**OFFICER** Title

Name DULCIO, KERRY RICKSON Address 2426 SE SANTOS DRIVE

City-State-Zip: PORT SAINT LUCIE FL 34952

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.

04/12/2022 SIGNATURE: DONNA PIXLEY **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date