

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

DOCUMENT# N45209

**Entity Name:** SOUTH ATLANTIC LIFESAVING ASSOCIATION, INC.

**Current Principal Place of Business:**

1628 THIRD AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

116 ARROW ROAD  
HILTON HEAD, SC 29928 US

**FEI Number:** 59-3089517

**Certificate of Status Desired:** No

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

WAGNER, MICHAEL F  
1628 THIRD AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250 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:** MICHAEL F WAGNER

06/22/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name GROH, ADRIENNE  
Address 861 RIVERLAND DR.  
City-State-Zip: CHARLESTON SC 29412

Title PRESIDENT  
Name WAGNER, MICHAEL FRANCIS  
Address 116 ARROW ROAD  
City-State-Zip: HILTON HEAD SC 29928

Title ADVISOR  
Name GILL, TOM  
Address 804 KENNEDY AVE  
City-State-Zip: VIRGINIA BEACH VA 23451

Title VP  
Name MOTZ, CHAD  
Address 2914 S. PAMLICO AVE  
City-State-Zip: NAGS HEAD NC 27959

Title TREASURER  
Name REED, MONTY  
Address 1015 SECOND AVE SOUTH  
City-State-Zip: NORTH MYRTLE BEACH SC 29582

*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:** MONTY REED

TREASURER

06/22/2020

Electronic Signature of Signing Officer/Director Detail

Date