

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51314

FILED
May 02, 2022
Secretary of State
2824074625CC

Entity Name: COASTAL COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1934 CR 30A
PORT SAINT JOE, FL 32456

Current Mailing Address:

1934 CR 30A
PORT SAINT JOE, FL 32456 US

FEI Number: 59-3170257

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DULANY, MARGARET A
245 BAY HIBISCUS DR
PORT SAINT JOE, FL 32456 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: MARGARET A DULANY

05/02/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	BEHAGE, GENE
Address	5974 COUNTY ROAD 30A
City-State-Zip:	PORT ST JOE FL 32456
Title	DIRECTOR
Name	RAGANELLA, ROSEMARY
Address	129 SAPODILLA LN
City-State-Zip:	PORT SAINT JOE FL 32456
Title	DIRECTOR
Name	RINEHART, JANNA
Address	1934 CR 30A
City-State-Zip:	PORT SAINT JOE FL 32456
Title	DIRECTOR
Name	MURPHY, BRENDAN
Address	122 SUMMER HOUSE LANE
City-State-Zip:	PORT ST. JOE FL 32456

Title	PRESIDENT
Name	HARDMAN, PATRICIA
Address	123 MARINER LANE
City-State-Zip:	PORT SAINT JOE FL 32456
Title	DIRECTOR
Name	THOMPSON, JERRY
Address	971 INDIAN PASS ROAD
City-State-Zip:	PORT ST JOE FL 32456
Title	SECRETARY
Name	DULANY, MARGARET A
Address	245 BAY HIBISCUS DR
City-State-Zip:	PORT ST. JOE FL 32456
Title	TREASURER
Name	EDWARDS, BUDDY
Address	551 GULF PINES DRIVE
City-State-Zip:	PORT SAINT JOE FL 32456

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: MARGARET A DULANY

SECRETARY

05/02/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROYCROFT, JAN
Address 186 POLARIS DR
City-State-Zip: PORT ST JOE FL 32456