

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000003725

**Entity Name:** DELUNA POINT HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**657 EAST ROMANA ST.  
PENSACOLA, FL 32502**Current Mailing Address:**PO BOX 12507  
PENSACOLA, FL 32591 US**FEI Number:** 59-3237935**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOODY, SUSAN L  
657 EAST ROMANA ST.  
PENSACOLA, FL 32502 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 DIRECTOR  
Name WHITE, DONALD  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR  
Name STANSELL, BUD  
Address 657 EAST ROMANA ST.  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR, PRESIDENT  
Name DORFMAN, NEIL  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR, TREASURER  
Name MALONE, MICHELLE  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR, VP  
Name FOSS, JAMES  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR, SECRETARY  
Name DESILVA, KATHLEEN  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR  
Name LANDI, ROBERT  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR  
Name JENSEN, CHRISTIAN  
Address PO BOX 12507  
City-State-Zip: PENSACOLA FL 32591

*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:** NEIL DORFMAN**PRESIDENT****01/10/2024**

Electronic Signature of Signing Officer/Director Detail

Date