2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005622

Entity Name: OSPREY POINTE AT DOLPHIN CAY OWNER'S ASSOCIATION,

INC.

Current Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762

Current Mailing Address:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762 US

FEI Number: 59-3278867 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZACUR & GRAHAM, P.A. **5200 CENTRAL AVENUE** ST. PETERSBURG, FL 33707 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: ZACUR & GRAHAM, P.A. 04/04/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

DIRECTOR Title DIRECTOR Title

Name WOLFE, FRANCIS Name ALLEN, THERESA

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title **PRESIDENT** Title VP, SECRETARY

CHUCAN, RONALD Name SADOSKY, BRENDA Name

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

CLEARWATER FL 33762 CLEARWATER FL 33762 City-State-Zip: City-State-Zip:

DIRECTOR Title **TREASURER** Title

Name CORWIN, FREDERIC Name KEENE, BRUCE

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR

NEUMANN, DONALD Name

Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260

CLEARWATER FL 33762 City-State-Zip:

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: CHUCAN, RONALD **PRESIDENT** 04/04/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 04, 2024

Secretary of State

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