

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002031

Entity Name: MAPLE ISLE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O COASTAL PROPERTY MANAGEMENT
1061 E. INDIANTOWN ROAD SUITE 310
JUPITER, FL 33477**Current Mailing Address:**C/O COASTAL PROPERTY MANAGEMENT
1061 E. INDIANTOWN ROAD SUITE 310
JUPITER, FL 33477 US**FEI Number:** 65-0602903**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FIELDS & BACHOVE, PLLC
4440 PGA BLVD
#308
PBG , FL 33410 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:** GARY FIELDS**04/26/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	OROSS, DAN
Address	C/O COASTAL PROPERTY MANAGEMENT 1061 E. INDIANTOWN ROAD SUITE 310
City-State-Zip:	JUPITER FL 33477

Title	TREASURER
Name	SAND, DAVID
Address	C/O COASTAL PROPERTY MANAGEMENT 1061 E. INDIANTOWN ROAD SUITE 310
City-State-Zip:	JUPITER FL 33477

Title	SECRETARY
Name	NIEMI, KARYL
Address	C/O COASTAL PROPERTY MANAGEMENT 1061 E. INDIANTOWN ROAD SUITE 310
City-State-Zip:	JUPITER FL 33477

Title	DIRECTOR
Name	BAIN, JACQUELINE
Address	C/O COASTAL PROPERTY MANAGEMENT 1061 E. INDIANTOWN ROAD SUITE 310
City-State-Zip:	JUPITER FL 33477

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: DAN OROSS**PRESIDEN****04/26/2023**

Electronic Signature of Signing Officer/Director Detail

Date