

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

DOCUMENT# N96000000472

**Entity Name:** DOMINION PROPERTY OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

3042 DOMINION COURT  
SAFETY HARBOR, FL 34695-5246

**Current Mailing Address:**

3042 DOMINION COURT  
SAFETY HARBOR, FL 34695-5246 US

**FEI Number:** 59-3356869

**Certificate of Status Desired:** No

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

BROWN, FRED W  
3042 DOMINION COURT  
SAFETY HARBOR, FL 34695-5246 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            PRESIDENT, DIRECTOR  
Name            BROWN, SUSAN  
Address        3042 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            VP, DIRECTOR  
Name            CASH, JEFFERY  
Address        3044 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            SECRETARY, DIRECTOR  
Name            ROCHELEAU, JUSTIN  
Address        3043 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            TREASURER, DIRECTOR  
Name            BROWN, FRED  
Address        3042 DOMINION COURT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            DIRECTOR  
Name            EROL, NURI  
Address        3045 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            DIRECTOR  
Name            DOLAN, MARCY  
Address        3041 DOMINION COURT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            DIRECTOR  
Name            EROL, MEHTAP  
Address        3045 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title            DIRECTOR  
Name            CASH, FRAN  
Address        3044 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

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*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:** FRED BROWN

**TREASURER**

**01/30/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name DOLAN, TIM  
Address 3041 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR  
Name NELSON, MICHAEL  
Address 3046 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR  
Name ROCHELEAU, KELLY  
Address 3043 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR  
Name NELSON, LAUREN  
Address 3046 DOMINION CT  
City-State-Zip: SAFETY HARBOR FL 34695