## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006929

Entity Name: LEA MARIE ISLAND PROPERTY OWNERS ASSOCIATION, INC.

FILED
Mar 06, 2024
Secretary of State
7782260677CC

## **Current Principal Place of Business:**

LEA MARIE ISLAND DRIVE PORT CHARLOTTE, FL 33952

## **Current Mailing Address:**

PO BOX 495840

PORT CHARLOTTE. FL 33949 US

FEI Number: 65-1042800 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SW GATEWAY, INC 1532 RIO DE JANEIRO PUNTA GORDA, FL 33983 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: KRISTINE WISHARD 03/06/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENT, DIRECTORTitleSECRETARY, TREASURERNameWILKINS, PETERNameSCHEIDECKER, ROSS

Address PO BOX 495840 Address PO BOX 495840

City-State-Zip: PORT CHARLOTTE FL 33949 City-State-Zip: PORT CHARLOTTE FL 33949

Title VP, DIRECTOR Title MANAGER

Name KOLAR, SHAWN Name WISHARD, KRISTINE

Address PO BOX 495840 Address PO BOX 495840

City-State-Zip: PORT CHARLOTTE FL 33949 City-State-Zip: PORT CHARLOTTE FL 33949

Title DIRECTOR

Name VANDENOEVER, TONY

Address PO BOX 495840

City-State-Zip: PORT CHARLOTTE FL 33949

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: KRISTINE WISHARD MANAGER 03/06/2024