

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

DOCUMENT# N99000007152

**Entity Name:** NANTUCKET PLACE OF PENSACOLA HOMEOWNERS ASSOCIATION, INC.**FILED**  
**Feb 28, 2024**  
**Secretary of State**  
**4732453214CC****Current Principal Place of Business:**6901-A N. 9TH AVE  
#191  
PENSACOLA, FL 32504**Current Mailing Address:**6901-A N. 9TH AVE  
#191  
PENSACOLA, FL 32504 US**FEI Number: 59-3627855****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SANDUSKY, ANGIE  
6901-A N. 9TH AVE  
#191  
PENSACOLA, FL 32504 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:** ANGIE SANDUSKY

02/28/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP
Name	O'LEARY, BILLIE
Address	6901-A N. 9TH AVE #191
City-State-Zip:	PENSACOLA FL 32504

Title	PRESIDENT
Name	WEICK, CHRISTINA
Address	6901-A N. 9TH AVE #191
City-State-Zip:	PENSACOLA FL 32504

Title	DIRECTOR
Name	KNIGHTS, CLIVE
Address	6901-A N. 9TH AVE #191
City-State-Zip:	PENSACOLA FL 32504

Title	MGR
Name	SANDUSKY, ANGIE
Address	6901-A N. 9TH AVE #191
City-State-Zip:	PENSACOLA FL 32504

Title	SECRETARY, TREASURER
Name	BROWN, APRIL
Address	6901-A N. 9TH AVE #191
City-State-Zip:	PENSACOLA FL 32504

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:** ANGIE R SANDUSKY**MGR**

02/28/2024

Electronic Signature of Signing Officer/Director Detail

Date