

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2008 08:00 AM
Secretary of State

DOCUMENT # 732057

1. Entity Name
THE MANGROVES ASSOCIATION, INC.



Principal Place of Business
**1218 SEA PLUME WAY
SARASOTA, FL 34242**

Mailing Address
**1218 SEA PLUME WAY
SARASOTA, FL 34242**



02032008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-2418801

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MOORE, ROBERT
227 NOKOMIS AVE S
P OBOX 1767
VENICE, FL 34284**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME KNUESE, JACK
STREET ADDRESS 1245 SEA PLUME WAY
CITY-ST-ZIP SARASOTA, FL 34242

TITLE P
NAME TOLBERT, CARL
STREET ADDRESS 1225 SEA PLUME WAY
CITY-ST-ZIP SARASOTA, FL 34242

TITLE T
NAME DUINK, SCOTT
STREET ADDRESS 1218 SEA PLUME WAY
CITY-ST-ZIP SARASOTA, FL 34242

TITLE V
NAME GROVE, MARY
STREET ADDRESS 1237 SEA PLUME WAY
CITY-ST-ZIP SARASOTA, FL 34242

TITLE S
NAME DERR, OFELIA
STREET ADDRESS 1222 SEA PLUME WAY
CITY-ST-ZIP SARASOTA, FL 34242

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Scott Dink