

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714432

Entity Name: COASTAL VISTA ASSOCIATION, INC.

Current Principal Place of Business:

725 N. RIVERSIDE DR. #104
POMPANO BEACH, FL 33062

Current Mailing Address:

725 N. RIVERSIDE DR. #104
POMPANO BEACH, FL 33062 US

FEI Number: 59-6218246

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUFRESNE, GARY
725 N. RIVERSIDE DR. #104
POMPANO BEACH, FL 33062 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
Name DUFRESNE, GARY
Address 725 N RIVERSIDE DR #306
City-State-Zip: POMPANO BEACH FL 33062

Title SECRETARY
Name KRAMPAT, STACY
Address 725 N. RIVERSIDE DR. #304
City-State-Zip: POMPANO BEACH FL 33062

Title VP
Name SACKS, SAUNDRA
Address 725 N. RIVERSIDE DR. #106
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name GIANNOLULIS, LUCY
Address 725 N. RIVERSIDE DR. #103
City-State-Zip: POMPANO BEACH FL 33062

Title TREASURER
Name LUCULANO, TONY
Address 725 N. RIVERSIDE DR. #204
City-State-Zip: POMPANO BEACH FL 33062

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: GARY DUFRESNE

PRESIDENT

03/28/2024

Electronic Signature of Signing Officer/Director Detail

Date