

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 714720

Entity Name: DOMMERICH BEACH AND CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

1640 CHINOOK TRAIL
MAITLAND, FL 32751

Current Mailing Address:

PO BOX 940722
MAITLAND, FL 32794-0722

FEI Number: 52-0895956

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, STEVEN A
1640 CHINOOK TRAIL
MAITLAND, FL 32751 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: STEVEN A BROWN

02/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WELCH, SHIRLEY
Address 530 PAWNEE TRAIL
City-State-Zip: MAITLAND FL 32751

Title VP
Name LILLING, COLLEEN
Address 250 SENECA TRAIL
City-State-Zip: MAITLAND FL 32751

Title SECRETARY
Name WOLFE, JENNY
Address 781 ARAPAHO TRAIL
City-State-Zip: MAITLAND FL 32751

Title TREASURER
Name BROWN, STEVEN A
Address 1640 CHINOOK TRL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name BROWN, ANDREA A
Address 1640 CHINOOK TRL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name CROCIATA, KRYSTEN
Address 1780 ALGONQUIN TRAIL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name BAGGET, PRISSY
Address 1860 MOHAWK TRAIL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name GRIFFIN, BETH
Address 570 DOMMERICH DRIVE
City-State-Zip: MAITLAND FL 32751

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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: STEVEN A BROWN

TREASURER

02/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JOHNSON, JUSTIN
Address 1638 ALGONQUIN TRAIL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name OSORIO, KRISTIN
Address 1860 CHIPPEWA TRAIL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name WHITE, BRIAN
Address 1621 CHINOOK TRAIL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name MESSINA, KAROLYE
Address 570 SENECA TRAIL
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name RAMEE, ANNE
Address 1704 SHAWNEE TRAIL
City-State-Zip: MAITLAND FL 32751