

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728528

Entity Name: TREASURE BEACH PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**239 TREASURE BEACH RD
SAINT AUGUSTINE, FL 32080**Current Mailing Address:**P.O. BOX 840122
ST. AUGUSTINE, FL 32080 US**FEI Number: 30-1136819****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLMOND, VIRGINIA S
239 TREASURE BEACH RD
SAINT AUGUSTINE, FL 32080 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:** VIRGINIA S ALLMOND

01/08/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	KIERNAN, MATTHEW
Address	229 BARCO RD
City-State-Zip:	SAINT AUGUSTINE FL 32080

Title	TREASURER
Name	ALLMOND, VIRGINIA S
Address	239 TREASURE BEACH RD
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	SECOND VICE PRESIDENT
Name	ARNOLD, DONNA
Address	213 PIZARRO RD
City-State-Zip:	ST AUGUSTINE FL 32080

Title	RECORDING SECRETARY
Name	KARPIAK, ROSANNA
Address	6312 GOMEZ RD
City-State-Zip:	ST AUGUSTINE FL 32080

Title	CORRESPONDING SECRETARY
Name	MCGEE, JAMES
Address	6070 COSTANERO RD
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	THIRD VICE PRESIDENT
Name	SCHOLLENBERGER, WILLIAM
Address	224 TREASURE BEACH RD
City-State-Zip:	SAINT AUGUSTINE FL 32080

Title	FIRST VICE PRESIDENT
Name	OSBORNE, HAROLD
Address	6195 COSTANERO RD
City-State-Zip:	ST. AUGUSTINE FL 32080

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: VIRGINIA S ALLMOND

TREASURER

01/08/2025

Electronic Signature of Signing Officer/Director Detail

Date