

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728528

Entity Name: TREASURE BEACH PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**212 MAJORCA ROAD
ST. AUGUSTINE, FL 32080**Current Mailing Address:**P.O. BOX 840122
ST. AUGUSTINE, FL 32080 US**FEI Number:** 23-7422286**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROBERTS, KRISTINE A
212 MAJORCA ROAD
ST 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:** KRISTINE A ROBERTS

03/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MARTIN, DOUGLAS
Address 253 TREASURE BEACH ROAD
City-State-Zip: SAINT AUGUSTINE FL 32080

Title SECOND VICE PRESIDENT
Name BRYNDA, CUMMINGS MRS.
Address 284 PIZARRO ROAD
City-State-Zip: ST AUGUSTINE FL 32080

Title THIRD VICE PRESIDENT
Name ABBOTT, STEVEN
Address 211 MAJORCA ROAD
City-State-Zip: ST. AUGUSTINE FL 32080

Title TREASURER
Name ROBERTS, KRISTINE A
Address 212 MAJORCA ROAD
City-State-Zip: SAINT AUGUSTINE FL 32080

Title RECORDING SECRETARY
Name STOCKDALE, CAROL
Address 261 TREASURE BEACH ROAD
City-State-Zip: ST AUGUSTINE FL 32080

Title CORRESPONDING SECRETARY
Name ROBERTS, KRISTINE A
Address 212 MAJORCA ROAD
City-State-Zip: SAINT 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: KRISTINE A ROBERTS

TREASURER

03/17/2020

Electronic Signature of Signing Officer/Director Detail

Date