

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728783

Entity Name: ROCKY POINT ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 26, 2024
Secretary of State
7264159430CC

Current Principal Place of Business:

5656 SE NASSAU TERRACE
STUART, FL 34997

Current Mailing Address:

P.O. BOX 502
PORT SALERNO, FL 34992 US

FEI Number: 30-0628311

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACKSON, PAM
5656 SE NASSAU TERRACE
STUART, FL 34997 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: PAM JACKSON

03/26/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JACKSON, PAMELA
Address 5656 NASSAU TERRACE
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name GRANDINETTI, MICHAEL
Address 5271 SE NASSAU TERRACE
City-State-Zip: STUART FL 34997

Title SECRETARY
Name HUNT, SHENA
Address 5076 SE ORANGE STREET
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name LARSON, WILL
Address 5335 MATOUSEK ST
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name DIAZ, RALPH
Address 5262 SE NASSAU TERRACE
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name MEISENBACHER, JOHN
Address 5272 SE NASSAU TERR
City-State-Zip: STUART FL 34997

Title TREASURER
Name STONE, CHERYL
Address 5695 SE MATOUSEK ST
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name CAPUTE, JOHN
Address 5395 SE ORANGE STREET
City-State-Zip: STUART FL 34997

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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: CHERYL STONE

TREASURER

03/26/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name THOMAS, AUSTIN
Address 4035 SE BAY STREET
City-State-Zip: STUART FL 34997