

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 733284

**FILED**  
**Apr 14, 2017**  
**Secretary of State**  
**CC1363081168**

**Entity Name:** FLORIDA SHORE AND BEACH PRESERVATION ASSOCIATION, INC.

**Current Principal Place of Business:**

1607 VILLAGE SQUARE BLVD. #7  
TALLAHASSEE, FL 32309-2772

**Current Mailing Address:**

P.O. BOX 13146  
TALLAHASSEE, FL 32317-3146

**FEI Number: 59-1876345**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LARSON, JACQUELINE A.  
1607 VILLAGE SQUARE BLVD.  
#7  
TALLAHASSEE, FL 32309 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: JACQUELINE A. LARSON**

**04/14/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FLACK, DEBORAH  
Address        1607 VILLAGE SQUARE BLVD SUITE 7  
City-State-Zip: TALLAHASSEE FL 32309-2772

Title            DIRECTOR  
Name            WELCH, LEANNE  
Address        1801 NORTH OCEAN BLVD.  
City-State-Zip: BOCA RATON FL 33432

Title            CHAIR  
Name            TRIFILIO, JIM  
Address        1540 MIRACLE STRIP PKWY  
City-State-Zip: FORT WALTON BEACH FL 32548

Title            VICE-CHAIR  
Name            DONALDSON, DON  
Address        2401 SE MONTEREY ROAD  
City-State-Zip: STUART FL 34996

Title            SECRETARY-TREASURER  
Name            WREFORD, LAIRD  
Address        1001 SARASOTA CENTER BLVD.  
City-State-Zip: SARASOTA FL 34240

Title            EXECUTIVE DIRECTOR  
Name            LARSON, JACQUELINE A  
Address        1607 VILLAGE SQUARE BLVD SUITE 7  
City-State-Zip: TALLAHASSEE FL 32309

*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: JACQUELINE A. LARSON**

**EXECUTIVE DIRECTOR**

**04/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date