

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733715

Entity Name: SEA SHELL CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**6500 MIDNIGHT PASS ROAD
SARASOTA, FL 34242**Current Mailing Address:**6500 MIDNIGHT PASS ROAD
SARASOTA, FL 34242 US**FEI Number:** 59-1848247**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAW OFFICES OF WELLS OLAH COCHRAN, P.A.
3277 FRUITVILLE ROAD
BUILDING B
SARASOTA, FL 34237 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	HILL, CHERYL A
Address	5236 STONETRACE DRIVE
City-State-Zip:	CINCINNATTI OH 45251

Title	VP
Name	ALPEROVICH, MIKHAIL
Address	17207 LAKAY PLACE
City-State-Zip:	TAMPA FL 33647

Title	TREASURER
Name	THOMPSON, LARRY D
Address	355 VALENTINE'S BROOK
City-State-Zip:	MUNROE FALLS OH 44262

Title	SECRETARY
Name	PALMER, DENNIS
Address	6855 HICKORY HILL DRIVE
City-State-Zip:	CLEVELAND OH 44143

Title	DIRECTOR
Name	JACOBS, THOMAS
Address	3955 FREDERICK STREET
City-State-Zip:	PITTSBURGH PA 15227

Title	LICENSED CAM
Name	MITCHELL, MARIA
Address	6500 MIDNIGHT PASS ROAD
City-State-Zip:	SARASOTA FL 34242

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: MARIA MITCHELL

LICENSED CAM

01/24/2023

Electronic Signature of Signing Officer/Director Detail

Date