

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740470

**Entity Name:** COSTA DEL SOL OF FLAGLER BEACH HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Jan 20, 2015**  
**Secretary of State**  
**CC3274110452**

**Current Principal Place of Business:**

UNIT 0  
3700-3900 S OCEANSHORE BLVD.  
FLAGLER BCH, FL 32136

**Current Mailing Address:**

UNIT 0  
3700-3900 S OCEANSHORE BLVD.  
FLAGLER BCH, FL 32136 US

**FEI Number: 59-1943055**

**Certificate of Status Desired: No**

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

WELLS, HELEN  
3700-28 S OCEANSHORE BLVD.  
FLAGLER BEACH, FL 32136 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           TREASURER  
Name           WELLS, HELEN  
Address        3700- 28 S. OCEANSHORE BLVD  
City-State-Zip: FLAGLER BEACH FL 32136

Title           V.P.  
Name           O'GRADY, MARY J  
Address        3700- 36 SOUTH OCEANSHORE BLVD  
City-State-Zip: FLAGLER BEACH FL 32136

Title           BOARD MEMBER  
Name           MCMAHON, RITA  
Address        3900-24 S. OCEAN SHORE BLVD.  
City-State-Zip: FLAGLER BEACH FL 32136

Title           SEC.  
Name           KISSEL, ANN  
Address        3900 - 7 SOUTH OCEANSHORE BLVD  
City-State-Zip: FLAGLER BEACH FL 32136

Title           PRESIDENT  
Name           CALDERWOOD, LYLE  
Address        3900-9 STH. OCEANSHORE BLVD.  
City-State-Zip: FLAGLER BEACH FL 32136

*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: HELEN WELLS**

**TREASURER**

**01/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date