## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 754762** 

Entity Name: SEA PALM OF FWB CONDOMINIUM ASSOCIATION, INC.

FILED Mar 22, 2024 Secretary of State 0958087342CC

## **Current Principal Place of Business:**

300 MIRACLE STRIP PARKWAY, SW

**OFFICE** 

FT. WALTON BEACH, FL 32548

## **Current Mailing Address:**

300 MIRACLE STRIP PARKWAY, SW

**OFFICE** 

FT. WALTON BEACH, FL 32548 US

FEI Number: 59-2157750 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PAULMAN, CARLA 300 MIRACLE STRIP PKWY SW

FORT WALTON BEACH, FL 32548 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: CARLA PAULMAN 03/22/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title DIRECTOR

Name TROUTMAN, ROY N Name BORELLI, JANINE

Address 710 SAILFISH DR Address 13601 TRAIL DRIVER STREET

City-State-Zip: FT. WALTON BEACH FL 32548 City-State-Zip: AUSTIN TX 78737

Title TREASURER Title SECRETARY

Name DENSON, AMANDA Name ROBINSON, CAROL

Address 300 MIRACLE STRIP PKWY Address 300 MIRACLE STRIP PKWY

4E 5B

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: FORT WALTON BEACH FL 32548

Title PRESIDENT

Name PAULMAN, CARLA

Address 300 MIRACLE STRIP PKWY

**UNIT 5A** 

City-State-Zip: FORT WALTON BEACH FL 32548

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: CARLA PAULMAN PRE

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/22/2024