

2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 765121

Entity Name: AMELIA LANDINGS PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5440 FIRST COAST HWY.
AMELIA ISLAND, FL 32034**Current Mailing Address:**C/O AMELIA ISLAND MANAGEMENT
5440 FIRST COAST HWY
AMELIA ISLAND, FL 32034 US**FEI Number:** 59-2363341**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAMBIASE, JR., NICHOLAS
5440 FIRST COAST HWY.
AMELIA ISLAND, FL 32034 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:** NICHOLAS LAMBIASE, JR.

12/12/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	STD
Name	KROIS-GIOCONDO, CAROL
Address	C/O AMELIA ISLAND MANAGEMENT 5440 FIRST COAST HWY
City-State-Zip:	AMELIA ISLAND FL 32034

Title	PD
Name	STILL, APRIL
Address	C/O AMELIA ISLAND MANAGEMENT 5440 FIRST COAST HWY
City-State-Zip:	AMELIA ISLAND FL 32034

Title	D
Name	BEVINS, PHILLIP
Address	C/O AMELIA ISLAND MANAGEMENT 5440 FIRST COAST HWY
City-State-Zip:	AMELIA ISLAND FL 32034

Title	D
Name	WOODWARD, JOANNE
Address	C/O AMELIA ISLAND MANAGEMENT 5440 FIRST COAST HWY
City-State-Zip:	AMELIA ISLAND FL 32034

Title	D
Name	JONES, ANDREW
Address	5440 FIRST COAST HWY.
City-State-Zip:	AMELIA ISLAND FL 32034

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: APRIL STILL**PRESIDENT**

12/12/2022

Electronic Signature of Signing Officer/Director Detail

Date