## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 769890** 

Entity Name: DUNE WALK BY THE OCEAN CONDOMINIUM ASSOCIATION,

INC.

**FILED** Apr 27, 2023 Secretary of State 7256413947CC

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

7380 S. OCEAN DRIVE JENSEN BEACH, FL 34957

## **Current Mailing Address:**

C/O SIGNATURE PROPERTY MGMT. 3171 SE DOMINICA TERRACE STUART, FL 34997 US

FEI Number: 65-0009600 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CARTWRIGHT, HENRY ESQ. FOX MCCLUSKEY BUSH ROBINSON, PLLC 3461 SE WILLOUGHBY BOULEVARD STUART, FL 34994 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: HENRY CARTWRIGHT, ESQ.

04/27/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

**SECRETARY PRESIDENT** Title Title

Name GARCIA, JOSE Name SOURS, KATHERINE (KATHY)

Address C/O SIGNATURE PROPERTY MGMT. Address C/O SIGNATURE PROPERTY MGMT.

3171 SE DOMINICA TERRACE 3171 SE DOMINICA TERRACE

City-State-Zip: STUART FL 34997 City-State-Zip: STUART FL 34997

VΡ Title Title **TREASURER** Name

GARCIA, ULISES Name COTE, KURT

Address C/O SIGNATURE PROPERTY MGMT. Address C/O SIGNATURE PROPERTY MGMT.

3171 SE DOMINICA TERRACE 3171 SE DOMINICA TERRACE

STUART FL 34997 STUART FL 34997 City-State-Zip: City-State-Zip:

DIRECTOR DIRECTOR Title Title

Name GONZALEZ, EVELIO Name CONNOR, PETER

Address C/O SIGNATURE PROPERTY MGMT. Address C/O SIGNATURE PROPERTY MGMT.

3171 SE DOMINICA TERRACE 3171 SE DOMINICA TERRACE

STUART FL 34997 City-State-Zip: STUART FL 34997 City-State-Zip:

Title DIRECTOR

GARCIA, MARCOS Name

C/O SIGNATURE PROPERTY MGMT. Address

3171 SE DOMINICA TERRACE

STUART FL 34997 City-State-Zip:

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: KATHERINE (KATHY) SOURS **PRESIDENT** 04/27/2023