2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00491

Entity Name: EBB TIDE CONDOMINIUM ASSOCIATION OF NEW SMYRNA

BEACH, INC.

Current Principal Place of Business:

4493 S. ATLANTIC AVENUE NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

4493 S. ATLANTIC AVENUE NEW SMYRNA BEACH, FL 32169 US

FEI Number: 59-2734318 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLEMM, RUSSELL E. ESQ. CLAYTON & MCCULLOH, P.A 1065 MAITLAND CENTER COMMONS BLVD. MAITLAND, FL 32751 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: RUSSELL E. KLEMM, ESQ. 02/20/2024

Electronic Signature of Registered Agent

Date

FILED Feb 20, 2024

Secretary of State

1749553091CC

Officer/Director Detail:

Title **PRESIDENT** Title

Name BLUEMKE, DON Name SULLINS, RANDY

4493 S. ATLANTIC AVENUE #802 4493 S. ATLANTIC AVENUE #501 Address Address NEW SMYRNA BEACH FL 32169 City-State-Zip: NEW SMYRNA BEACH FL 32169 City-State-Zip:

Title **TREASURER** Title **SECRETARY** Name BOZARD, JOHN Name COLLIER, CAROLINE

Address 4493 S. ATLANTIC AVENUE #206 4493 S. ATLANTIC AVENUE #501 Address City-State-Zip: NEW SMYRNA BEACH FL 32169 City-State-Zip: NEW SMYRNA BEACH FL 32169

DIRECTOR Title Name CHAPIN, ROB

Address 4493 S. ATLANTIC AVENUE #507 City-State-Zip: NEW SMYRNA BEACH FL 32169

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: DONALD BLUEMKE

PRESIDENT

02/20/2024