

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01346

Entity Name: ST. LUCIE CLUB AND APARTMENT HOMES, BUILDING D, INC.**Current Principal Place of Business:**C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE 400
STUART, FL 34994**Current Mailing Address:**C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE 400
STUART, FL 34994 US**FEI Number:** 59-2386351**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLLIAKOFF, PA
401 SE OSCEOLA STREET
FIRST FLOOR
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:** JANE CORNETT

06/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	LUKACS, THEODORE
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

Title	VP, TREASURER
Name	HOWE, RICHARD
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

Title	PRESIDENT
Name	HAMILTON, WINSTON
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

Title	DIRECTOR
Name	BASIL, SANDRA
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

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: WINSTON HAMILTON

PRESIDENT

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date