

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001434

Entity Name: SEA PINES SUBDIVISION HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1198 OYSTER BAY DR.
MILTON, FL 32583**Current Mailing Address:**1198 OYSTER BAY DR.
MILTON, FL 32583 US**FEI Number:** 30-0169338**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRAFT, JENNY
1198 OYSTER BAY DR.
MILTON, FL 32583 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:** JENNY CRAFT

01/19/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OTHER
Name HERRICK, SHARON HESS
Address 1312 E CERVANTES ST
City-State-Zip: PENSACOLA FL 32501

Title TREASURER
Name CRAFT, JENNY M.
Address 1154 OYSTER BAY DR.
City-State-Zip: MILTON FL 32583

Title SECRETARY
Name WALKER, ROSEANNE
Address 3311 GULF BREEZE PARKWAY,
PMB#125
City-State-Zip: PENSACOLA FL 32501

Title PRESIDENT
Name WOODWORTH, DAVID
Address 3311 GULF BREEZE PARKWAY,
PMB#125
City-State-Zip: PENSACOLA FL 32501

Title VP
Name ROHAN, BILL
Address 3311 GULF BREEZE PARKWAY,
PMB#125
City-State-Zip: PENSACOLA FL 32501

Title PD
Name CLARKE, CORDLIN
Address 7151 NW 45TH CT
City-State-Zip: LAUDERHILL FL 33319

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: JENNY CRAFT**TREASURER**

01/19/2021

Electronic Signature of Signing Officer/Director Detail

Date