

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008537

**Entity Name:** SORRENTO VILLAGE OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

43 SORRENTO CT.  
SATELLITE BEACH, FL 32937

**Current Mailing Address:**

43 SORRENTO CT.  
SATELLITE BEACH, FL 32937

**FEI Number: 03-0492291**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HUGHES, PATRICK H. PRESIDENT  
65 SORRENTO CT  
SATELLITE BEACH, FL 32937 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: PATRICK H. HUGHES**

**02/24/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HUGHES, PATRICK H.  
Address        65 SORRENTO CT  
City-State-Zip: SATELLITE BEACH FL 32937

Title            VP  
Name            PETERS, PETE  
Address        60 SORRENTO CT  
City-State-Zip: SATELLITE BEACH FL 32937

Title            TREASURER  
Name            SHANKLE, PATRICIA  
Address        47 SORRENTO CT.  
City-State-Zip: SATELLITE BEACH FL 32937

Title            SECRETARY  
Name            KUNIGONIS, ED  
Address        49 SORRENTO CT  
City-State-Zip: SATELLITE BEACH FL 32937

*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: PATRICIA SHANKLE**

**TREASURER**

**02/24/2024**

Electronic Signature of Signing Officer/Director Detail

Date