

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

DOCUMENT# N05000003431

**Entity Name:** SUWANNEE BELLE PROPERTY OWNERS ASSOCIATION, INC.**FILED**  
**Feb 04, 2024**  
**Secretary of State**  
**1743722182CC****Current Principal Place of Business:**16334 196TH TERRACE  
SUWANNEE BELLE AIRPORT  
O'BRIEN, FL 32071**Current Mailing Address:**16334 196TH TERRACE  
SUWANNEE BELLE AIRPORT  
O'BRIEN, FL 32071 US**FEI Number:** 26-0111641**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MICHEL, PAUL JOHN  
16334 196TH TERRACE  
SUWANNEE BELLE AIRPORT  
O'BRIEN, FL 32071 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:** PAUL J. MICHEL

02/04/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	KAURICH, STEVEN J
Address	16346 196TH TERRACE
City-State-Zip:	O'BRIEN FL 32071

Title	VP
Name	GLEASON, JOSEPH
Address	1635 NW 19TH CIRCLE
City-State-Zip:	GAINESVILLE FL 32605

Title	S
Name	DODD, CRISTINE SEC.
Address	16379 198TH TERRACE
City-State-Zip:	OBRIEN FL 32071

Title	D
Name	LIBBY, BARBARA
Address	19432 161ST COURT
City-State-Zip:	OBRIEN FL 32071

Title	PRESIDENT
Name	MICHEL, PAUL JOHN
Address	16334 196TH TERRACE
City-State-Zip:	OBRIEN FL 32071

*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:** PAUL J. MICHEL**PRESIDENT**

02/04/2024

Electronic Signature of Signing Officer/Director Detail

Date