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

DOCUMENT# N13676

Entity Name: FISHER ISLAND COMMUNITY ASSOCIATION, INC.

FILED
Apr 02, 2024
Secretary of State
1234681593CC

# **Current Principal Place of Business:**

ONE FISHER ISLAND DRIVE FISHER ISLAND. FL 33109

## **Current Mailing Address:**

ONE FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 US

FEI Number: 65-0004587 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PEYTON BOLIN, PL 3343 W. COMMERCIAL BLVD SUITE 100

FORT LAUDERDALE, FL 33309 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRESIDENT Title	DIRECTOR
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NameSOSA, ROBERTONameVON HANAU, HEINRICHAddressONE FISHER ISLAND DRIVEAddressONE FISHER ISLAND DRIVECity-State-Zip:FISHER ISLAND FL 33109City-State-Zip:FISHER ISLAND FL 33109

Title DIRECTOR Title DIRECTOR

Name FERRARO, JAMES L. Name HAFNER, STEVE

Address ONE FISHER ISLAND DRIVE Address ONE FISHER ISLAND DRIVE

City-State-Zip: FISHER ISLAND FL 33109

City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR Title DIRECTOR

Name MELNICK, LAURIE Name VECCHIO, ROBERT

Address ONE FISHER ISLAND DRIVE Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109
City-State-Zip: FISHER ISLAND FL 33109

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: ROBERTO SOSA

Electronic Signature of Signing Officer/Director Detail

04/02/2024

**PRESIDENT** 

Date