

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000007693

Entity Name: CASTINE COVE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**112 N. PONCE DE LEON BLVD
UNIT C
ST. AUGUSTINE, FL 32084**Current Mailing Address:**PO BOX 1389
ST AUGUSTINE, FL 32085 US**FEI Number: 82-2537740****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAULERSON, JANEEN
112 N. PONCE DE LEON BLVD
UNIT C
ST. AUGUSTINE, FL 32084 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:** JANEEN RAULERSON**03/06/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	GANGI, STEPHEN
Address	P.O BOX 1389
City-State-Zip:	ST. AUGUSTINE FL 32085

Title	SECRETARY, TREASURER
Name	PALUMBO, SUSAN
Address	P.O BOX 1389
City-State-Zip:	ST. AUGUSTINE FL 32085

Title	AGENT
Name	RAULERSON , JANEEN L
Address	P.O. BOX 1389
City-State-Zip:	ST. AUGUSTINE FL 32085

Title	TREASURER
Name	BROWN, JAMES
Address	PO BOX 1389
City-State-Zip:	SAINT AUGUSTINE FL 32085

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: STEPHEN GANGI**PRESIDENT****03/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date