

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22685

Entity Name: SNELL ISLE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1229 CENTRAL AVENUE
ST. PETERSBURG, FL 33705

Current Mailing Address:

P.O. BOX 7053
ST. PETERSBURG, FL 33734

FEI Number: 59-0247525

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADMIRE, DOROTHY
1197 EDEN ISLE BLVD. NE
UNIT 1
SAINT PETERSBURG, FL 33704 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 SECRETARY
Name CAPP A II, JOHN R
Address 1233 EDEN ISLE DR. NE
City-State-Zip: ST. PETERSBURG FL 33704

Title TREASURER
Name TIELEMANS, SCOTT
Address 1041 SNELL ISLE BLVD NE
City-State-Zip: ST. PETERSBURG FL 33704

Title VP
Name LABBEE, MICHAEL
Address 827 SNELL ISLE BLVD NE
City-State-Zip: ST. PETERSBURG FL 33704

Title DIRECTOR
Name MCQUEEN, DENEEN
Address 830 MONTEREY BLVD. NE
City-State-Zip: SAINT PETERSBURG FL 33704

Title DIRECTOR
Name BITTER, KRISTINE
Address 1253 CORDOVA BLVD NE
City-State-Zip: SAINT PETERSBURG FL 33704

Title PRESIDENT
Name MEANS, MARY FRANCES
Address 1350 SNELL ISLE BLVD NE
 #2
City-State-Zip: SAINT PETERSBURG FL 33704

Title DIRECTOR
Name PETERSON, JUSTIN
Address SNELL ISLE BLVD NE
City-State-Zip: SAINT PETERSBURG FL 33704

Title DIRECTOR
Name FARMER, LISA
Address 930 MONTEREY PT NE
City-State-Zip: SAINT PETERSBURG FL 33704

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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: JOHN R CAPP A II

SECRETARY

03/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HUTCHINSON, RYAN
Address 1010 EDEN ISLE DR NE
City-State-Zip: SAINT PETERSBURG FL 33704

Title DIRECTOR
Name HUDSON, KIM
Address 132 MIRAMAR BLVD NE
City-State-Zip: SAINT PETERSBURG FL 33704