

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000664

Entity Name: ROSELAND COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**8150 133RD PLACE
SEBASTIAN, FL 32958**Current Mailing Address:**P.O. BOX 201
ROSELAND, FL 32957 US**FEI Number:** 65-0558314**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SALMON, KIMBERLY
8150 133RD PLACE
SEBASTIAN, FL 32958 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:** KIMBERLY S SALMON

03/02/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DILL, HOLLY
Address 11675 ROSELAND ROAD
City-State-Zip: SEBASTIAN FL 32958

Title TREASURER
Name SALMON, KIMBERLY S
Address 8150 133RD PLACE
City-State-Zip: SEBASTIAN FL 32958

Title VP
Name CARLSON, CY
Address PO BOX 507
City-State-Zip: ROSELAND FL 32957

Title SECRETARY
Name BAKER, BRAD
Address PO BOX 415
City-State-Zip: ROSELAND FL 32957

Title DIRECTOR
Name POWELL, GLENN
Address PO BOX 450
City-State-Zip: ROSELAND FL 32957

Title DIRECTOR
Name SHELHAMER, VIRGINIA A.
Address PO BOX 160
City-State-Zip: ROSELAND FL 32957

Title DIRECTOR
Name BISHOP, BEN
Address 8301 135TH LANE
City-State-Zip: SEBASTIAN FL 32958

Title DIRECTOR
Name PERRY, MAGGIE
Address 47 SUNSET DRIVE
City-State-Zip: SEBASTIAN FL 32958

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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: KIMBERLY S SALMON

TREASURER

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SABOL, BRUCE
Address PO BOX 1060
City-State-Zip: ROSELAND FL 32957

Title DIRECTOR
Name MCCAFFREY, KATHY
Address 6 SUNSET DRIVE
City-State-Zip: SEBASTIAN FL 32958

Title DIRECTOR
Name BRIDGE, KATHY
Address 7490 129TH LANE
City-State-Zip: SEBASTIAN FL 32958