

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004013

FILED
Mar 25, 2020
Secretary of State
3747122927CC

Entity Name: ST. THOMAS AT SILVER SHELLS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12815 EMERALD COAST PARKWAY
SUITE 100
MIRAMAR BEACH, FL 32550

Current Mailing Address:

P.O. BOX 1779
DESTIN, FL 32540 US

FEI Number: 59-3568349

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEWMAN-DAILEY RESORT PROPERTIES, INC.
12815 EMERALD COAST PARKWAY
SUITE 100
MIRAMAR BEACH, FL 32550 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: KEN WAMPLER

03/25/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CARTER, STEVE
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title DIRECTOR
Name POWELL, TOM
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title TREASURER
Name LAMARTINA, JOEY
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title SECRETARY
Name RICE, BOYD
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title VICE PRESIDENT
Name WALKER, TODD
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title DIRECTOR
Name POSTULKA, GREGORY
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title DIRECTOR
Name PURSELL, DAVID
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title CAM
Name WAMPLER, KEN
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

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: KEN WAMPLER

CAM

03/25/2020

Electronic Signature of Signing Officer/Director Detail

Date