

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000097618

**Entity Name:** NORTH FLORIDA RESORT, INC.**Current Principal Place of Business:**8000 US 1 SOUTH  
ST AUGUSTINE, FL 32086**Current Mailing Address:**8000 US 1 SOUTH  
ST AUGUSTINE, FL 32086 US**FEI Number:** 27-4154261**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHNEIDER, EDWARD J  
8000 US 1 SOUTH  
ST AUGUSTINE, FL 32086 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:** EDWARD J SCHNEIDER

01/12/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	SCHNEIDER, EDWARD J
Address	9277 JULY LN
City-State-Zip:	ST AUGUSTINE FL 32080-8632

Title	VP
Name	ROTHENHAUSLER, ROBERT P
Address	380 BRANTLEY HARBOR DR
City-State-Zip:	ST AUGUSTINE FL 32086-1842

Title	VP
Name	SCHNEIDER, BRIAN E
Address	264 BRANTLEY HARBOR DR
City-State-Zip:	ST AUGUSTINE FL 32086-1822

Title	VP
Name	SCHNEIDER, JOSEPH R
Address	240 BRANTLEY HARBOR DR
City-State-Zip:	ST AUGUSTINE FL 32086-1822

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT P ROTHENHAUSLER

VP

01/12/2023

Electronic Signature of Signing Officer/Director Detail

Date