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: SAMUEL SHAW

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA NOT FOR PROFIT CORPORATION	ANNUAL REPORT

**DOCUMENT# 729238** 

Entity Name: EAGLE BEND ISLAND ASSOCIATION, INC.

#### **Current Principal Place of Business:**

16970 EAGLE BEND BLVD JACKSONVILLE, FL 32226

#### **Current Mailing Address:**

16970 EAGLE BEND BLVD JACKSONVILLE, FL 32226 US

### FEI Number: 59-2239346

# Name and Address of Current Registered Agent:

FLORIDIAN PROPERTY MANAGEMENT, LLC 414 OLD HARD ROAD SUITE 502 FLEMING ISLAND, FL 32003 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.

KYLE MEAGHER			04/25/2022	
Electronic Signature of Registered Agent			Date	
Officer/Director Detail :				
PD	Title	SD		
SHAW, SAMUEL A.	Name	PERDUE, LYDIA HOPE		
17283 RIVER ISLE CIRCLE	Address	17134 DORADO CIRLCE		
JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226		
VPD	Title	TD		
WRIGHT, CHRISTOPHER	Name	MCCASKILL, DANIEL J.		
1260 GORHAM STREET	Address	1839 EAGLE BEND TERRACE		
JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226		
	KYLE MEAGHER   Electronic Signature of Registered Agent   cor Detail :   PD   SHAW, SAMUEL A.   17283 RIVER ISLE CIRCLE   JACKSONVILLE FL 32226   VPD   WRIGHT, CHRISTOPHER   1260 GORHAM STREET	KYLE MEAGHER   Electronic Signature of Registered Agent   cor Detail :   PD Title   SHAW, SAMUEL A. Name   17283 RIVER ISLE CIRCLE Address   JACKSONVILLE FL 32226 City-State-Zip:   VPD Title   WRIGHT, CHRISTOPHER Name   1260 GORHAM STREET Address	KYLE MEAGHER   Electronic Signature of Registered Agent   cor Detail :   PD Title   SHAW, SAMUEL A.   17283 RIVER ISLE CIRCLE   JACKSONVILLE FL 32226   VPD   Title   VPD   WRIGHT, CHRISTOPHER   1260 GORHAM STREET	

### Certificate of Status Desired: No

04/25/2022 Date

# FILED Apr 25, 2022 Secretary of State 0012370563CC

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