2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010934

Entity Name: KAITLYN'S PRESERVE HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 23, 2020
Secretary of State
0510815097CC

Current Principal Place of Business:

217 MIRACLE STRIP PARKWAY S.E. ATTN: PANHANDLE PROPERTY GROUP, INC 105 FORT WALTON BEACH, FL 32548

Current Mailing Address:

P.O. BOX 2620

FORT WALTON BEACH, FL 32549 US

FEI Number: 45-3910754 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCLEOD, JON ELLIS 217 MIRACLE STRIP PARKWAY S.E. ATTN: PANHANDLE PROPERTY GROUP, INC. 105 FORT WALTON BEACH, FL 32548 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: JON ELLIS MCLEOD 01/23/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

DIRECTOR Title Title DIRECTOR Name ROBINSON, OMAR Name LAKOTICH, FRANK 4509 BETH CIRCLE Address 4542 ANNABELLE LANE Address City-State-Zip: City-State-Zip: CRESTVIEW FL 32539 CRESTVIEW FL 32539 Title VΡ Title **PRESIDENT**

NameMITCHELL, JENNIFERNameEVERHART, CHRISTYAddress4505 BETH CIRCLEAddress4532 ANNABELLE LANECity-State-Zip:CRESTVIEW FL 32539City-State-Zip:CRESTVIEW FL 32539

Title **SECRETARY** Title **TREASURER** THIESSEN, LISA Name Name ESTRADA, CESAR Address 4514 BETH CIRCLE 4503 BETH CIRCLE Address City-State-Zip: CRESTVIEW FL 32539 City-State-Zip: CRESTVIEW FL 32539

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: MITCHELL, JENNIFER

PRESIDENT

01/23/2020