2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010934

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

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   01/15/2019

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	DIRECTOR	Title	DIRECTOR
Name	ROBINSON, OMAR	Name	JONES, LINETTE
Address	4509 BETH CIRCLE	Address	4542 ANNABELLE LANE
City-State-Zip:	CRESTVIEW FL 32539	City-State-Zip:	CRESTVIEW FL 32539
Title	PRESIDENT	Title	VP
Name	MITCHELL, JENNIFER	Name	EVERHART, CHRISTY
Address	4505 BETH CIRCLE	Address	4532 ANNABELLE LANE
City-State-Zip:	CRESTVIEW FL 32539	City-State-Zip:	CRESTVIEW FL 32539
Title	TREASURER	Title	SECRETARY
Name	ESTRADA, CESAR	Name	THIESSEN, LISA
Address	4503 BETH CIRCLE	Address	4514 BETH CIRCLE
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: JENNIFER MITCHELL   PRESIDENT   01/15/2019

Electronic Signature of Signing Officer/Director Detail   Date