

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24884

**FILED**  
**Jan 19, 2016**  
**Secretary of State**  
**CC6978287196**

**Entity Name:** ECONFINA OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4292 RIVER ST.  
LAMONT, FL 32336

**Current Mailing Address:**

4292 RIVER ST.  
LAMONT, FL 32336 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SUMNER, VIRGINIA A  
4292 RIVER ST.  
LAMONT, FL 32336 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:** VIRGINIA A SUMNER

01/19/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SUMNER, GINNY  
Address 4292 RIVER ST  
City-State-Zip: LAMONT FL 32336

Title D  
Name CERTAIN, ANNETTE  
Address 4284 RIVER STREET  
City-State-Zip: LAMONT FL 32336

Title S  
Name MACDONALD, SANDRA M  
Address 4187 POPPELL STREET  
City-State-Zip: LAMONT FL 32336

Title VP  
Name BUXTON, RAMONA  
Address 21652 NW 154 PLACE  
City-State-Zip: HIGH SPRINGS FL 32643

Title DIRECTOR  
Name MASSEY, FORREST  
Address 4200 POPPELL STREET  
City-State-Zip: LAMONT FL 32336

*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:** GINNY SUMNER

**PRESIDENT**

01/19/2016

Electronic Signature of Signing Officer/Director Detail

Date