

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

DOCUMENT# N48524

**Entity Name:** KATHRYN OAKS HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 02, 2016**  
**Secretary of State**  
**CC1116996686**

**Current Principal Place of Business:**

130 CORRIDOR RD.  
# 2055  
PONTE VEDRA, FL 32004

**Current Mailing Address:**

130 CORRIDOR RD.  
# 2055  
PONTE VEDRA, FL 32004

**FEI Number: 59-3136302**

**Certificate of Status Desired: No**

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

EWING, JOHN  
130 CORRIDOR RD.  
# 2055  
PONTE VEDRA, FL 32004 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name IANNELLA, MICHAEL  
Address 8988 LAKE KATHRYN DR  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title VP  
Name JAMES, RONALD  
Address 8968 LAKE KATHRYN DR  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title TREASURER  
Name JAY, MICHAEL  
Address 8972 LAKE KATHRYN DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 32082

*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: RONALD JAMES**

**VICE PRESIDENT**

**04/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date