2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002463

Entity Name: MACKERY WOODS HOMEOWNERS ASSOCIATION INC.

FILED Apr 02, 2017 **Secretary of State** CC9369027582

Current Principal Place of Business:

89 PAMALA PLACE C/O CHARLES CHAFIN SOPCHOPPY, FL 32358

Current Mailing Address:

89 PAMALA PLACE C/O CHARLES CHAFIN SOPCHOPPY, FL 32358

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAFIN, CHARLES C 89 PAMELA PLACE SOPCHOPPY, FL 32358 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PΠ Title SD

CHAFIN, CHARLES CURTIS AMBER PATTERSON Name Name Address 89 PAMALA PLACE Address 97 PAMELA PLACE

C/O CHARLES CHAFIN City-State-Zip: SOPCHOPPY FL 32358 SOPCHOPPY FL 32358

Title SA

Title Name

JAMES, KAREN Name CHAFIN, PAMELA 14 PAMELA PLACE Address 89 PAMELA PL Address

City-State-Zip: SOPCHOPPY FL 32358 SOPCHOPPY FL 32358 City-State-Zip:

Title **PRESIDENT** Title D

Name ROCCO, OLLIE CHAFIN, CHARLES Name

Address 53 MACKERY WOODS ROAD Address 89 PAMELA PLACE City-State-Zip: SOPCHOPPY FL 32358

City-State-Zip: SOPCHOPPY FL 32358

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: PAMELA J. CHAFIN

Electronic Signature of Signing Officer/Director Detail

04/02/2017 **TREASURER**

Date