

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006512

FILED
Apr 04, 2018
Secretary of State
CC6377473378

Entity Name: KENANSVILLE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1180 S CANOE CREEK RD
KENANSVILLE, FL 34739

Current Mailing Address:

POST OFFICE BOX 41
KENANSVILLE, FL 34739

FEI Number: 59-3551864

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUDSON, CORTNEY
1180 S. CANOE CREEK RD.
KENANSVILLE, FL 34739 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: CORTNEY HUDSON

04/04/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PALMER, DAVID
Address 175 N.MYRTLE DR.
City-State-Zip: KENANSVILLE FL 34739

Title DIRECTOR
Name VICKERS, FAY
Address 705 VICKERS ROAD
City-State-Zip: KENANSVILLE FL 34739

Title TREASURER
Name HUDSON, CORTNEY
Address 1180 S. CANOE CREEK RD.
City-State-Zip: KENANSVILLE FL 34739

Title VP
Name VICKERS, STONEY
Address 705 VICKERS ROAD
City-State-Zip: KENANSVILLE FL 34739

Title DIRECTOR
Name BROWN, RICK
Address 1370 LAKE MARIAN RD.
City-State-Zip: KENANSVILLE FL 34739

Title DIRECTOR
Name HARVEY, SHELLEY
Address 187 NORTH BOW ST,
City-State-Zip: KENANSVILLE FL 34739

Title SECRETARY
Name BASS, CHRISTY
Address 1180 S. CANOE CREEK RD.
City-State-Zip: KENANSVILLE FL 34739

Title DIRECTOR
Name HEATH, JUDY
Address 240 4TH AVENUE
City-State-Zip: KENANSVILLE FL 34739

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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: CORTNEY HUDSON

TREASURER

04/04/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name SAYOC, ASHLEY

Address 340 4TH AVE.

City-State-Zip: KENANSVILLE FL 34739