## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 734397** 

Entity Name: MINI-FARMS PROPERTY OWNERS' ASSOCIATION, INC.

FILED Apr 19, 2017 Secretary of State CC1194187219

Certificate of Status Desired: No

## **Current Principal Place of Business:**

6843 N CITRUS AVE BLDG 3 SUITE K

CRYSTAL RIVER, FL 34428

## **Current Mailing Address:**

6843 N CITRUS AVE BLDG 3 SUITE K CRYSTAL RIVER, FL 34428 US

FEI Number: 51-0189511

Name and Address of Current Registered Agent:

HORNE, JANET M 6843 N CITRUS AVE BLDG 3 SUITE K

CRYSTAL RIVER, FL 34428 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: REBECCA FURLOW

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title PRESIDENT Title VF

Name HOWARD-CERASE, MELANIE Name OGBURN, KAREN
Address P. O. BOX 1289 Address P. O. BOX 1289

City-State-Zip: CRYSTAL RIVER FL 34423 City-State-Zip: CRYSTAL RIVER FL 34423

TitleSECRETARYTitleTREASURERNameKISNER, SHIRLEY TNameSNOW, LINDAAddressP. O. BOX 1289AddressP. O. BOX 1289

City-State-Zip: CRYSTAL RIVER FL 34423 City-State-Zip: CRYSTAL RIVER FL 34423

TitleDIRECTORTitleDIRECTORNamePAYNE, JONNameTURNER, VICKI LAddressP. O. BOX 1289AddressP. O. BOX 1289

City-State-Zip: CRYSTAL RIVER FL 34423 City-State-Zip: CRYSTAL RIVER FL 34423

Title DIRECTOR

Name GRANKE, ERNEST Address P. O. BOX 1289

City-State-Zip: CRYSTAL RIVER FL 34423

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: SHIRLEY T. KISNER SECRETARY 04/19/2017

04/19/2017