

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 734397

**FILED  
Mar 12, 2019  
Secretary of State  
3252786515CC**

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

**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

**Certificate of Status Desired:** No

**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

03/12/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PAYNE, JON  
Address        P. O. BOX 1289  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            VP, TREASURER  
Name            MCKEE, DANIEL J  
Address        P. O. BOX 1289  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            DIRECTOR  
Name            KISNER, SHIRLEY T  
Address        P. O. BOX 1289  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            SECRETARY  
Name            JONES, FINETT  
Address        P. O. BOX 1289  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            ASST. SECRETARY  
Name            WOODS-STEVENS, JODI  
Address        P. O. BOX 1289  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            DIRECTOR  
Name            TURNER, VICKI L  
Address        P. O. BOX 1289  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            DIRECTOR  
Name            BACON, GEORGE  
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:** JON PAYNE

**PRESIDENT**

03/12/2019

Electronic Signature of Signing Officer/Director Detail

Date