

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734397

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

Current Principal Place of Business:

2541 N RESTON TERRACE
HERNANDO, FL 34442

Current Mailing Address:

2541 N RESTON TERRACE
HERNANDO, FL 34442 US

FEI Number: 51-0189511

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILLAGES SERVICES COOPERATIVE, INC.
2541 N RESTON TERRACE
HERNANDO, FL 34442 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: GERALYN BOND

03/06/2020

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

03/06/2020

Electronic Signature of Signing Officer/Director Detail

Date