

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743018

Entity Name: JOHN KNOX VILLAGE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

101 NORTHLAKE DR.
ORANGE CITY, FL 32763

Current Mailing Address:

101 NORTHLAKE DR.
ORANGE CITY, FL 32763

FEI Number: 59-1831906

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, GARY S
465 SUMMERHAVEN DR.
STE. D
DEBARY, FL 32713 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CD
Name STARK, DENNIS
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title STD
Name LEFILS, GREGORY
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title VCD
Name O'CONNOR, WILLIAM
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title DIRECTOR
Name JACQUES, JERRY
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title DIRECTOR
Name LANKFORD, CHERYL
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title DIRECTOR
Name KELTON, PAULA
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title CAO
Name TRAINOR, JOSEPH
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Title CFO
Name WOLF, DANIEL
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763

Continues on page 2

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: DENNIS STARK

CHAIRMAN

01/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GONZALES, JESSE
Address 101 NORTHLAKE DR
City-State-Zip: ORANGE CITY FL 32763

Title DIRECTOR
Name CORNETT, TAVER
Address 101 NORTHLAKE DR.
City-State-Zip: ORANGE CITY FL 32763