

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754696

Entity Name: THE KIMBERLY HOME, INC.**Current Principal Place of Business:**1189 N.E. CLEVELAND ST.
CLEARWATER, FL 33755**Current Mailing Address:**1189 N.E. CLEVELAND ST.
CLEARWATER, FL 33755 US**FEI Number:** 59-2077208**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KELLY, ROBERT ESQ.
605 PALM BLVD.
SUITE A
DUNEDIN, FL 34698 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:** ROBERT KELLY

05/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name REHM, SCOTT
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title CEO
Name KELLY, KATHLEEN M
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name REHM, MARY
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title TREASURER
Name POPSON, JOHN
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title VC
Name MCCARTHY, MICHAEL
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name BOYDEN, ANN
Address 1189 NE CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name PERENICH, GREGORY
Address 1189 NE CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name BARALT, WILLIAM
Address 1189 NE CLEVELAND ST.
City-State-Zip: CLEARWATER FL

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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: KATHLEEN M KELLY

CEO

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ANNIS, BRIAN
Address 1189 NE CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title SECRETARY
Name O'DELL, ANGELA
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name MOORE, MARY BETH
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name O'SHAUGHNESSY, JOANNA
Address 1189 N.E. CLEVELAND ST.
City-State-Zip: CLEARWATER FL 33755