

2014 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:

GRAY, PHILIP J CHAIRMAN
1025 KENWOOD DR
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: PHILIP J GRAY

04/07/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name GRAY, PHILIP J
Address 1025 KENWOOD DR.
City-State-Zip: DUNEDIN FL 34698

Title VC
Name REHM, SCOTT
Address 1450 CHUKAR RIDGE
City-State-Zip: PALM HARBOR FL 34683

Title CEO
Name KELLY, KATHLEEN M
Address 839 HILLSIDE DR.
City-State-Zip: PALM HARBOR FL 34683

Title SECRETARY
Name BEATTY, KATHLEEN SSJ
Address 2220 WILLOWBROOK DR.
City-State-Zip: CLEARWATER FL 33764

Title DIRECTOR
Name CARSON, KEN
Address 1570 FIFE CT.
City-State-Zip: DUNEDIN FL 34698

Title DIRECTOR
Name REHM, MARY
Address 1450 CHUKAR RIDGE
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name QUILL, MICHAEL
Address PO BOX 170
City-State-Zip: DUNEDIN FL 34698

Title DIRECTOR
Name NORMANDIN, ANNMARIE
Address 2286 HIGHLAND WOODS DR.
City-State-Zip: DUNEDIN FL 34698

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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

04/07/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name POPSON, JOHN
Address 156 BROOKSIDE COURT
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name MCCRAE, KAREN
Address 2736 JARVIS CIRCLE
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name MCCARTHY, MICHAEL
Address 2555 NURSERY RD.
 101
City-State-Zip: CLEARWATER FL 33764

Title DIRECTOR
Name TRAUTWEIN, WILLIAM T
Address 1949 LOS LOMAS DR.
City-State-Zip: CLEARWATER FL 33764