

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 769771

**Entity Name:** KIMBERLEA CONDOMINIUM V ASSOCIATION, INC.**Current Principal Place of Business:**2025 SYLVESTER RD  
BLDG W  
LAKELAND, FL 33803**Current Mailing Address:**P O BOX 92797  
LAKELAND, FL 33804 US**FEI Number:** 59-2928126**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HALL, JOHN  
5121 SOUTH LAKELAND DR  
SUITE 1  
LAKELAND, FL 33813 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:** JOHN HALL**08/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                                |
|-----------------|--------------------------------|
| Title           | SECRETARY                      |
| Name            | WHEELER, LINDA                 |
| Address         | 2025 SYLVESTER RD<br>UNIT BB-3 |
| City-State-Zip: | LAKELAND FL 33803              |

|                 |                               |
|-----------------|-------------------------------|
| Title           | PRESIDENT                     |
| Name            | FIELD, MARY CAROLYN           |
| Address         | 2025 SYLVESTER RD<br>UNIT H-4 |
| City-State-Zip: | LAKELAND FL 33803             |

|                 |                          |
|-----------------|--------------------------|
| Title           | VP                       |
| Name            | CARDEN, PAT              |
| Address         | 2025 SYLVESTER RD<br>H-6 |
| City-State-Zip: | LAKELAND FL 33803        |

|                 |                               |
|-----------------|-------------------------------|
| Title           | DIRECTOR                      |
| Name            | WARD, JEAN                    |
| Address         | 2025 SYLVESTER RD<br>UNIT H-2 |
| City-State-Zip: | LAKELAND FL 33803             |

|                 |                                  |
|-----------------|----------------------------------|
| Title           | TREASURER                        |
| Name            | KEFALOS, DIANE                   |
| Address         | 2025 SYLVESTER ROAD<br>UNIT AA-3 |
| City-State-Zip: | LAKELAND FL 33803                |

*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:** MARY CAROLYN FIELD**PRESIDENT****08/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date