|--|

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: ROBERT S RHINEHART

Electronic Signature of Signing Officer/Director Detail

## **Current Mailing Address:** PO BOX 13089

TALLAHASSEE, FL 32317

#### FEI Number: 59-2435959

#### Name and Address of Current Registered Agent:

RHINEHART, ROBERT S 644 CAPITAL CIRCLE NE TALLAHASSEE, FL 32301 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.

Title

Name Address D

BRESNAHAN, MARK

644 CAPITAL CIR NE

REGISTERED AGENT

SIGNATURE:

### Electronic Signature of Registered Agent

**Officer/Director Detail :** 

Title	MANAGER/AGENT
Name	RHINEHART, ROBERT S
Address	PO BOX 13089
City-State-Zip:	TALLAHASSEE EL 32317

City-State-Zip:	TALLAHASSEE FL 32317	City-State-Zip:	TALLAHASSEE FL 32301
Title	P	Title	S/T
Name	MATHIS, JEANINE	Name	LAWRENCE, JACQUELYN
Address	644 CAPITAL CIR NE	Address	644 CAPITAL CIR NE
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32301

#### Certificate of Status Desired: No

Date

04/06/2016

# 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT FILED

## Entity Name: CUMBERLAND FOREST CONDOMINIUM ASSOCIATION, INC.

## **Current Principal Place of Business:**

644 CAPITAL CIR NE TALLAHASSEE. FL 32301

DOCUMENT# N02828

Apr 06, 2016 Secretary of State CC3007616789

Date