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: BRYAN KUHRT

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

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Officer/Director Detail :								
Title	PRESIDENT	Title	SECRETARY					
Name	KUHRT, BRYAN	Name	PHELPS, SARAH					
Address	7400 BAYMEADOWS WAY SUITE 317	Address	7400 BAYMEADOWS WAY SUITE 317					
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256					
Title	VP							
Name	CONNELLY, MATTHEW							
Address	7400 BAYMEADOWS WAY SUITE 317							

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: JAMES GIANCOLA

City-State-Zip: JACKSONVILLE FL 32256

## Name and Address of Current Registered Agent:

FEI Number: 04-3794470

ASSOCIA - CMC JACKSONVILLE 7400 BAYMEADOWS WAY

SUITE 317 JACKSONVILLE, FL 32256 US

**Current Mailing Address:** 

7400 BAYMEADOWS WAY

JACKSONVILLE, FL 32256

SUITE 317

7400 BAYMEADOWS WAY **SUITE 317** JACKSONVILLE, FL 32256 US

**Current Principal Place of Business:** 

### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N0400000339

Entity Name: MAGNOLIA WEST HOMEOWNERS ASSOCIATION, INC.

# Certificate of Status Desired: No

FILED Apr 29, 2022 Secretary of State 4096315411CC

> 04/29/2022 Date

04/29/2022

Date