## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002010

Entity Name: VILLAS AT COVINGTON PARK HOMEOWNERS ASSOCIATION,

INC.

FILED Apr 30, 2021 Secretary of State 5877691594CC

**Current Principal Place of Business:** 

644 CAPITAL CIRCLE NE TALLAHASSEE, FL 32301

**Current Mailing Address:** 

P.O. BOX 13089

TALLAHASSEE, FL 32317

FEI Number: 72-1608059 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCKEE, KAYLA 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.

SIGNATURE: KAYLA MCKEE 04/30/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title DIRECTOR

Name LYON, ED Name BROWN, RANDY

Address 644 CAPITAL CIRCLE NE Address 644 CAPITAL CIRCLE NE

City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

Title VP Title MANAGER/AGENT
Name FORNEY, HAZEL Name MCKEE, KAYLA

Address 644 CAPITAL CIRCLE NE Address P.O. BOX 13089

City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32317

Title SECRETARY

Name SIMMONS, SANDY

Address 644 CAPITAL CIRCLE NE

City-State-Zip: TALLAHASSEE FL 32301

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: KAYLA MCKEE MANAGER 04/30/2021