

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12838

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC0429251984**

**Entity Name:** COUNTRYSIDE AT THE VALLEY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

786 BLANDING BLVD, #118  
ORANGE PARK, FL 32065

**Current Mailing Address:**

786 BLANDING BLVD, #118  
ORANGE PARK, FL 32065 US

**FEI Number: 59-2622279**

**Certificate of Status Desired: Yes**

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

PERRY, ALAN  
786 BLANDING BLVD, #118  
ORANGE PARK, FL 32065 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name ROBERTS, BARBARA  
Address 786 BLANDING BLVD #118  
City-State-Zip: ORANGE PARK FL 32065

Title D  
Name DEVANE, VALERIE  
Address 786 BLANDING BLVD #118  
City-State-Zip: ORANGE PARK FL 32065

Title VPD  
Name BILIK, JOAN  
Address 786 BLANDING BLD #118  
City-State-Zip: ORANGE PARK FL 32065

Title TD  
Name KEETON, CAROL  
Address 786 BLANDING BLVD #118  
City-State-Zip: ORANGE PARK FL 32065

Title SD  
Name MORICLE, JEANNE  
Address 786 BLANDING BLVD. STE 118  
City-State-Zip: ORANGE PARK FL 32065

*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: BARBARA ROBERTS**

**P**

**03/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date