

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13469

Entity Name: KING'S BAY COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**311 BAYSIDE AVE
WINTER GARDEN, FL 34787**Current Mailing Address:**311 BAYSIDE AVENUE
WINTER GARDEN, FL 34787 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLAIR, LARRY A II
311 BAYSIDE AVENUE
WINTER GARDEN, FL 34787 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:** LARRY A. BLAIR, II

05/01/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GALLAGHER, JAMES
Address 411 TIMBER CREEK DRIVE N.
City-State-Zip: WINTER GARDEN FL 34787

Title SECRETARY
Name BLAIR, STACI
Address 311 BAYSIDE AVENUE
City-State-Zip: WINTER GARDEN FL 34787

Title TREASURER
Name BLAIR, LARRY
Address 311 BAYSIDE AVENUE
City-State-Zip: WINTER GARDEN FL 34787

Title PRESIDENT
Name CAINES, MICHAEL
Address 300 N. PARK AVENUE
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name CAINES, JOSHUA
Address 312 N. PARK AVENUE
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name BLAIR, ANTHONY
Address 424 TIMBERCREEK DR. S
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name JOHNSON, ALLEN
Address 303 BAYSIDE AVENUE
City-State-Zip: WINTER GARDEN FL 34787

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: LARRY BLAIR

TREASURER

05/01/2016

Electronic Signature of Signing Officer/Director Detail

Date