

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000008701

Entity Name: NICEVILLE HOUSING DEVELOPMENT CORPORATION**Current Principal Place of Business:**500 BOYD CIRCLE
NICEVILLE, FL 32578**Current Mailing Address:**500 BOYD CIRCLE
NICEVILLE, FL 32578**FEI Number:** 82-2164279**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**COPUS, JENNIFER H
1184 EGLIN PARKWAY
SHALIMAR, FL 32579 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	P
Name	DUNN, KATHY
Address	500 BOYD CIRCLE
City-State-Zip:	NICEVILLE FL 32578

Title	VP
Name	ALLEN, FREDDIE
Address	500 BOYD CIRCLE
City-State-Zip:	NICEVILLE FL 32578

Title	S
Name	AVERY, DOTTIE
Address	500 BOYD CIRCLE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	GRINER, STAN
Address	500 BOYD CIRCLE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	SPENCE, FRIEDA
Address	500 BOYD CIRCLE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	BRANTON, DENNIS
Address	500 BOYD CIRCLE
City-State-Zip:	NICEVILLE FL 32578

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: DOTTIE AVERY**SECRETARY****04/03/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date