

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000005819

**FILED**  
**Mar 04, 2020**  
**Secretary of State**  
**5551777506CC**

**Entity Name:** ST. JOHNS PRESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1698-A WEST HIBISCUS BLVD.,  
MELBOURNE, FL 32901

**Current Mailing Address:**

1698-A WEST HIBISCUS BLVD.,  
MELBOURNE, FL 32901 US

**FEI Number: 83-0638306**

**Certificate of Status Desired: No**

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

EVANS, ANDREW B  
1698-A WEST HIBISCUS BLVD.,  
MELBOURNE, FL 32901 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 D  
Name EVANS, ANDREW B  
Address 1698-A WEST HIBISCUS BLVD.,  
City-State-Zip: MELBOURNE FL 32901

Title D  
Name KENNEDY, BONNIE L  
Address 1698-A WEST HIBISCUS BLVD.,  
City-State-Zip: MELBOURNE FL 32901

Title D  
Name EVANS, THOMAS D  
Address 1698-A WEST HIBISCUS BLVD.,  
City-State-Zip: MELBOURNE FL 32901

*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: ANDREW B EVANS**

**RA**

**03/04/2020**

Electronic Signature of Signing Officer/Director Detail

Date