2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18532

Entity Name: FLORAL PARK RANCH ESTATES HOMEOWNERS

ASSOCIATION INC.

Current Principal Place of Business:

4129 57TH AVENUE VERO BEACH, FL 32967

Current Mailing Address:

4129 57TH AVENUE VERO BEACH, FL 32967

FEI Number: 59-2782414 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLT, WILLIAM 4129 57TH AVE VERO BEACH, FL 32967 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

FILED Mar 16, 2015

Secretary of State

CC4826681423

Officer/Director Detail:

Title **PRESIDENT** Title VICE, PRESIDENT Name HOLT, WILLIAM C Name MCKINNEY, MARY B Address 4129 57TH AVENUE Address **5616 41ST STREET** City-State-Zip: VERO BEACH FL 32967 City-State-Zip: VERO BEACH FL 32967

Title **TREASURER** Title **SECRETARY** GIPSON, WANDA Name JACKSON, VIRGINIA Name Address 4296 57TH AVE Address 4186 57 AVE

City-State-Zip: VERO BEACH FL 32967 City-State-Zip: VERO BEACH FL 32967

Title **DIRECTOR** Title DIRECTOR

Name GIPSON, GODFREY E Name HUNTER, RICHARD

Address 4136 57TH CT. 4276 57TH COURT Address

City-State-Zip: VERO BEACH. FL 32967 City-State-Zip: VERO BEACH FL 32967

Title DIRECTOR Title **DIRECTOR**

Name WILSON, KATHRYN REAGAN, DON Name Address 4116 57TH COURT Address **5686 41ST STREET**

City-State-Zip: VERO BEACH FL 32967 VEROBEACH FL 32967 City-State-Zip:

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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.

03/16/2015 SIGNATURE: WILLIAM HOLT **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name WILSON, NOLA

Address 4205 57TH COURT

City-State-Zip: VERO BEACH FL 32967