

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000006273

**Entity Name:** ANNIE'S WALK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**227 ANNIES PLACE  
JACKSONVILLE, FL 32218**Current Mailing Address:**227 ANNIES PLACE  
JACKSONVILLE, FL 32218 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	PRESIDENT, DIRECTOR
Name	DENNIS, LISA
Address	227 ANNIES PLACE
City-State-Zip:	JACKSONVILLE FL 32218

Title	VP, DIRECTOR
Name	KEUNING, SCOTT
Address	227 ANNIES PLACE
City-State-Zip:	JACKSONVILLE FL 32218

Title	VP, SECRETARY, DIRECTOR
Name	STEVENS, COREY
Address	227 ANNIES PLACE
City-State-Zip:	JACKSONVILLE FL 32218

Title	VP, TREASURER
Name	BRADLEY, JAYNE
Address	227 ANNIES PLACE
City-State-Zip:	JACKSONVILLE FL 32218

*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:** LISA DENNIS**PRESIDENT****03/29/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date