#### 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. 04/19/2017

SIGNATURE: KENNETH C SULLIVAN

Electronic Signature of Signing Officer/Director Detail

# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N29145

## Entity Name: COUNTRY ADDRESS COMMUNITY ASSOCIATION, INC.

# **Current Principal Place of Business:**

107 N. LINE DR APOPKA, FL 32703

### **Current Mailing Address:**

107 N. LINE DR APOPKA, FL 32703 US

### FEI Number: 59-2871531

# Name and Address of Current Registered Agent:

SUTHERLAND MANAGEMENT, INC. 107 N. LINE DR APOPKA, FL 32703 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

# **Officer/Director Detail :**

| Title           | PRESIDENT           | Title           | TREASURER       |
|-----------------|---------------------|-----------------|-----------------|
| Name            | SULLIVAN, KENNETH C | Name            | COHEN, ROBERTA  |
| Address         | 107 N. LINE DR.     | Address         | 107 N. LINE DR. |
| City-State-Zip: | APOPKA FL 32703     | City-State-Zip: | APOPKA FL 32703 |

PRESIDENT

Certificate of Status Desired: No

Apr 19, 2017 Secretary of State CC9346955839

Date

FILED

Date