

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N40814

**Entity Name:** PRIMERA OWNER'S ASSOCIATION, INC.

**FILED**  
**Apr 14, 2016**  
**Secretary of State**  
**CC5435889289**

**Current Principal Place of Business:**

1516 E HILLCREST ST  
STE 210  
ORLANDO, FL 32803

**Current Mailing Address:**

1516 E HILLCREST ST  
STE 210  
ORLANDO, FL 32803 US

**FEI Number: 59-3416608**

**Certificate of Status Desired: No**

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

FIRST CAPITAL PROPERTY GROUP INC  
1516 E HILLCREST ST STE 210  
ORLANDO, FL 32803 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 PD  
Name THOMAS, JOHN E  
Address 1000 PRIMERA BOULEVARD  
City-State-Zip: LAKE MARY FL 32746

Title VD  
Name WHIT, DUNCAN  
Address 20 N ORANGE AVE, STE 605  
City-State-Zip: ORLANDO FL 32801

Title STD  
Name MAGDA, PAM  
Address 615 CRESCENT EXECUTIVE COURT  
SUITE 112  
City-State-Zip: LAKE MARY FL 32746

Title D  
Name LANE, FRED  
Address 231 WEST MINNESOTA AVENUE  
City-State-Zip: DELAND FL 32720

Title DIRECTOR  
Name HAYDEN, KIMBERLY  
Address 755 CURRENCY CIRCLE  
City-State-Zip: LAKE MARY FL 32746

*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: THOMAS, JOHN E**

**PD**

**04/14/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date