2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46252

Entity Name: J.K.V. FOUNDATION, INC.

Current Principal Place of Business:

101 NORTHLAKE DRIVE

ORANGE CITY. FL 32763

Current Mailing Address:

101 NORTHLAKE DRIVE ORANGE CITY, FL 32763

FEI Number: 59-3108265 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, GARY S 465V SUMMERHAVEN DR SUITE C DEBARY, FL 32713 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 Jan 03, 2017

Secretary of State

CC0798763695

Officer/Director Detail:

Title Title TD

Name BRIM. JOHN Name MCGHIN. ANDREW JJR

Address 1585 BRIMSHIRE CIRCLE Address 120 SOUTHLAKE DR, APT 218-C

City-State-Zip: ORANGE CITY FL 32763 City-State-Zip: DELAND FL 32720

Title **CHAIRMAN** Title Name WES. BECK Name DEMPSEY, DONALD

Address 27-A FLORABUNDA CIRCLE Address 451 EAST GRAVES AVE ORANGE CITY FL 32763 City-State-Zip: ORANGE CITY FL 32763 City-State-Zip:

Title Title

RIDGELY, RANDY Name Name RITCHEY, JEFFERY L

1113 HERON POINT WAY Address Address 1859 PROVIDENCE BLVD

City-State-Zip: DELAND FL 32724 City-State-Zip: DELTONA FL 32725

Title **SECRETARY** Title **DIRECTOR**

Name BRADLEY, BARBARA Name MCFALL. ROBERT D

Address 01-A EUCALYPTUS DRIVE **DELTONA MEMORIAL GARDENS** Address

1295 SAXON BOULEVARD ORANGE CITY FL 32763 City-State-Zip:

ORANGE CITY FL 32763 City-State-Zip:

Continues on page 2

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 MCGHIN **TREASURER**

Electronic Signature of Signing Officer/Director Detail

01/03/2017 Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name KRISTOFIX, LINDA Name STARK, DENNIS

Address 212 SOUTHLAKE DRIVE Address 205 VICTORIA COMMONS BLVD

City-State-Zip: ORANGE CITY FL 32763 City-State-Zip: DELAND FL 32724