2020 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:

DELAND FL 32763

WRIGHT, GARY S 465 SUMMERHAVEN DR SUITE D 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Mar 23, 2020

Secretary of State

7651506428CC

Officer/Director Detail:

Title D	Title D)
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Name BRIM. JOHN Name KONECSNY, GABE Address 4 NORTHLAKE DR., UNIT A Address 210 SOUTHLAKE DR. ORANGE CITY FL 32763 City-State-Zip: City-State-Zip: ORANGE CITY FL 32720

Title DIRECTOR Title

Name GLOERSEN, BRITTANY Name CAMPBELL, ANITA Address 145 E. RICH AVE. SUITE C Address 1039 TORCHWOOD DRIVE City-State-Zip: DELAND FL 32724

Title Title

RIDGELY, RANDY Name Name LEFILS, GREGORY

1113 HERON POINT WAY Address Address 161 E. ROSE AVE.

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

Title **CHAIRMAN** Title **SECRETARY**

Name KRISTOFIK, LINDA Name BRADLEY, BARBARA Address 212 SOUTHLAKE DRIVE Address 01-A EUCALYPTUS DRIVE 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.

03/23/2020 SIGNATURE: LINDA KRISTOFIK PRES.

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name STARK, DENNIS Name BURGESS, BURL

Address 205 VICTORIA COMMONS BLVD Address 1637 BENT OAKS CIRCLE

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