2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000609

Entity Name: KIMBERLEA COMMUNITY FACILITIES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2025 SYLVESTER ROAD BUILDING W LAKELAND, FL 33803

Current Mailing Address:

2025 SYLVESTER ROAD BUILDING W LAKELAND, FL 33803 US

FEI Number: 59-3226363

MAITLAND, FL 32751 US

Name and Address of Current Registered Agent:

MCCULLOH, NEAL THE CLAYTON S MCCULLOH BUILDING 1065 MAITLAND CENTER COMMONS BLVD

Certificate of Status Desired: No

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	Ρ	Title	V
Name	HUTCHERSON, ANNETTE	Name	HOSNER, JOE
Address	2025 SYLVESTER ROAD #C5	Address	2025 SYLVESTER RD #S5
City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	LAKELAND FL 33803
Title	D	Title	т
Name	REYNOLDS, GWEN	Name	DANKOWSKI, JENNIFER
Address	2025 SYLVESTER RD #QQ3	Address	2025 SYLVESTER ROAD #HH3
City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	LAKELAND FL 33803
Title	S	Title	D
Title Name	S WILLIAMS, JULIE	Title Name	D MCCRANIE, FRANCES
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Name	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207	Name	MCCRANIE, FRANCES
Name Address City-State-Zip:	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803	Name Address	MCCRANIE, FRANCES 2025 SYLVESTER RD. #I5
Name Address	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207	Name Address	MCCRANIE, FRANCES 2025 SYLVESTER RD. #I5
Name Address City-State-Zip:	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803	Name Address	MCCRANIE, FRANCES 2025 SYLVESTER RD. #I5
Name Address City-State-Zip: Title	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803 DIRECTOR	Name Address	MCCRANIE, FRANCES 2025 SYLVESTER RD. #I5

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: ANNETTE HUTCHERSON

PRESIDENT

04/22/2014 Date

Date

Electronic Signature of Signing Officer/Director Detail