2019 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

Name and Address of Current Registered Agent:

MCCULLOH, NEAL THE CLAYTON S MCCULLOH BUILDING 1065 MAITLAND CENTER COMMONS BLVD MAITLAND, FL 32751 US 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	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR
	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	TREASURER, DIRECTOR	Title	DIRECTOR
	Name	KELTER, DICK	Name	FIELD, CAROLYN
	Address	2025 SYLVESTER RD	Address	2025 SYLVESTER ROAD
	City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	LAKELAND FL 33803
	Title	SECRETARY, DIRECTOR	Title	DIRECTOR
	Title Name	SECRETARY, DIRECTOR WILLIAMS, JULIE	Title Name	DIRECTOR MORAND, DEBBIE
		,		
	Name Address	WILLIAMS, JULIE	Name Address	MORAND, DEBBIE
	Name Address City-State-Zip:	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803	Name Address	MORAND, DEBBIE 2025 SYLVESTER RD.
	Name Address	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207	Name Address	MORAND, DEBBIE 2025 SYLVESTER RD.
	Name Address City-State-Zip:	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803	Name Address	MORAND, DEBBIE 2025 SYLVESTER RD.
	Name Address City-State-Zip: Title	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803 DIRECTOR	Name Address	MORAND, DEBBIE 2025 SYLVESTER RD.
	Name Address City-State-Zip: Title Name Address	WILLIAMS, JULIE 2025 SYLVESTER RD, #N207 LAKELAND FL 33803 DIRECTOR BECK, SUE	Name Address	MORAND, DEBBIE 2025 SYLVESTER RD.

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

02/27/2019

Date