

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002139

Entity Name: EVENTIDE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**516 EVENTIDE DR
GULF BREEZE, FL 32561**Current Mailing Address:**516 EVENTIDE DR
GULF BREEZE, FL 32561 US**FEI Number:** 59-3241416**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADAMS, JOHN
516 EVENTIDE DR
GULF BREEZE, FL 32561 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:** JOHN C ADAMS

03/15/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MCCRAY, DANNY
Address 526 EVENTIDE DR
City-State-Zip: GULF BREEZE FL 32561

Title VICE PRESIDENT
Name TUGGLE, TERRY
Address 524 EVENTIDE DR
City-State-Zip: GULF BREEZE FL 32561

Title SECRETARY
Name JAVIER, CHRISTY
Address 502 EVENTIDE DR
City-State-Zip: GULF BREEZE FL 32561

Title TREASURER
Name DECAROLIS, CHARLES
Address 500 EVENTIDE DR
City-State-Zip: GULF BREEZE FL 32561

Title ASST TREASURER
Name ADAMS, JOHN C
Address 516 EVENTIDE DR
City-State-Zip: GULF BREEZE FL 32561

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: JOHN C ADAMS

ASST TREASURER

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date