

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004578

Entity Name: GREEN HILLS COMMUNITY CENTER, INC.**Current Principal Place of Business:**17913 PARK PL.
FOUNTAIN, FL 32438**Current Mailing Address:**P.O. BOX 284
FOUNTAIN, FL 32438**FEI Number:** 59-1617740**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MISSKERG, CYNTHIA L
18735 WESTCHESTER DR
BOX 114
FOUNTAIN, FL 32438 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**Officer/Director Detail :**

Title	PRESIDENT
Name	NORTON, JEFF
Address	13203 WEBBER ROAD
City-State-Zip:	FOUNTAIN FL 32438

Title	VP
Name	BEGONA, CLAUDIO
Address	18003 SORRELLS ROAD
City-State-Zip:	FOUNTAIN FL 32438

Title	SECRETARY
Name	NORTON, TAWYNA
Address	13203 WEBBER ROAD
City-State-Zip:	FOUNTAIN FL 32438

Title	TREASURER
Name	MISSKERG, CYNTHIA
Address	18735 WEST CHESTER DR
City-State-Zip:	FOUNTAIN FL 32438

Title	DIRECTOR
Name	KELLEY, SHARON
Address	18003 SORRELLS RD
City-State-Zip:	FOUNTAIN FL 32438

Title	DIRECTOR
Name	METILLE, CHRIS
Address	18910 DEEP SPRINGS RD
City-State-Zip:	FOUNTAIN FL 32438

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: CLAUDIO BEGONA

VP

02/16/2017

Electronic Signature of Signing Officer/Director Detail_____
Date