

2020 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:**BEGONA, KATHERINE A
18003 SORRELLS ROAD
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:** KATHERINE BEGONA

02/04/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title VICE PRESIDENT
Name BEGONA, KATHERINE
Address 18003 SORRELLS ROAD
City-State-Zip: FOUNTAIN FL 32438

Title TREASURER
Name PETTERSEN, LINDA
Address P.O. BOX 198
City-State-Zip: FOUNTAIN FL 32438

Title SECRETARY
Name HAWTHORN, RICHARD
Address 18323 GOWAN ROAD
City-State-Zip: FOUNTAIN FL 32438

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

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

Title DIRECTOR
Name KELLEY, SHARON
Address 18003 SORRELLS ROAD
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: KATHERINE BEGONA

VICE PRESIDENT

02/04/2020

Electronic Signature of Signing Officer/Director Detail

Date