

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001598

**Entity Name:** KOKOMO KEY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CMC MANAGEMENT  
2950 JOG ROAD  
GREENACRES, FL 33461

**Current Mailing Address:**

C/O CMC MANAGEMENT  
2950 JOG ROAD  
GREENACRES, FL 33461

**FEI Number:** 65-0669265

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ST JOHN, CORE AND LEMME, P.A.  
CENTURION TOWER, STE 701  
1601 FORUM PLACE  
WEST PALM BEACH, FL 33401 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 PD  
Name HARVEY, TODD  
Address 1071 KOKOMO KEY LANE  
City-State-Zip: DELRAY BEACH FL 33483

Title D  
Name GROVEMAN, SETH  
Address 952 KOKOMO KEY LANE  
City-State-Zip: DELRAY BEACH FL 33483

Title VP  
Name HERROU, TODD L  
Address 830 KOKOMO KEY LANE  
City-State-Zip: DELRAY BEACH FL 33483

Title TREASURER  
Name WISEMAN, FREDERICK  
Address 915 KOKOMO KEY LANE  
City-State-Zip: DELRAY BEACH FL 33483

Title SECRETARY  
Name MANNI, LINDA  
Address 1069 KOKOMO KEY LN  
City-State-Zip: DELRAY BEACH FL 33483

*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:** TODD HARVEY

**PRESIDENT**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date