

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09778

FILED
Jan 17, 2012
Secretary of State

Entity Name: THE RESIDENTS' ASSOCIATION OF JOHN KNOX VILLAGE OF TAMPA BAY, INC.

Current Principal Place of Business:

4100 E FLETCHER AVE
BOX 1209
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

4100 E FLETCHER AVE
BOX 1209
TAMPA, FL 33613 US

New Mailing Address:

FEI Number: 59-2576523 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YMIOLEK, RICHARD A
4000 E FLETCHER AVE
G109
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: YMIOLEK, RICHARD A
Address: 4000 E FLETCHER AVE APT G109
City-St-Zip: TAMPA, FL 33613

Title: VD
Name: SPIELER, DAVID
Address: 4000 E FLETCHER AVE APT I104
City-St-Zip: TAMPA, FL 33613

Title: 2VD
Name: CICCARELLO, ROSARIO
Address: 4000 E FLETCHER AVE APT E 106
City-St-Zip: TAMPA, FL 33613

Title: SD
Name: SULLIVAN, CELESTE
Address: 4000 E FLETCHER AVE APT B314
City-St-Zip: TAMPA, FL 33613

Title: ATD
Name: STANTON, RICHARD
Address: 4100E FLETCHER AVE APT K302
City-St-Zip: TAMPA, FL 33613

Title: TD
Name: YOUNG, GEORGE A
Address: 4100E FLETCHER AVE APT 812
City-St-Zip: TAMPA, FL 33613

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: RICHARD A. YMIOLEK

PD

01/17/2012

Electronic Signature of Signing Officer or Director

Date