

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743339

**Entity Name:** KILRUSH HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2965 SHAMROCK NORTH  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

2965 SHAMROCK NORTH  
ATTN: SANDRA TUCKER UNIT F-21  
TALLAHASSEE, FL 32309 US

**FEI Number:** 59-2071300

**Certificate of Status Desired:** No

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

RICHARDSON, SHARON C  
1625 METROPOLITAN CIRCLE - STE. A  
TALLAHASSEE, FL 32308 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 DIRECTOR  
Name WILSON, FAITH  
Address 763 SHERMAN ROAD  
City-State-Zip: CAIRO GA 39828

Title P  
Name PRIM, ROY  
Address 2965 SHAMROCK N # G-27  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name TUCKER, SANDRA  
Address 2965 SHAMROCK N #F-21  
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR  
Name LAWTON, KATHRYN  
Address 2965 SHAMROCK N #J-36  
City-State-Zip: TALLAHASSEE FL 32309

*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:** ROY PRIM

**PRESIDENT**

**04/10/2025**

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

\_\_\_\_\_  
Date