

2016 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:**2785 EDENDERRY DRIVE
TALLAHASSEE, FL 32309**FEI Number:** 59-2071300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETFORD, VAUGHN
2785 EDENDERRY DRIVE
TALLAHASSEE, FL 32309 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 DP
Name FOLEY, TOM
Address 2965 SHAMROCK NORTH #D-16
City-State-Zip: TALLAHASSEE FL 32309

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

Title T
Name PETFORD, VAUGHN
Address 2785 EDENDERRY DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name PETFORD, MARCIA L
Address 2785 EDENDERRY DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title DS
Name DIXON, MARILYN M
Address 2965 SHAMROCK NORTH # C-12
City-State-Zip: TALLAHASSEE FL 32309

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

Title DIRECTOR
Name OBERLIN, CAROL
Address 2965 SHAMROCK N #D-15
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: VAUGHN PETFORD**TREASURER****04/02/2016**

Electronic Signature of Signing Officer/Director Detail

Date