2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002010

Entity Name: VILLAS AT COVINGTON PARK HOMEOWNERS ASSOCIATION,

INC.

FILED
Mar 28, 2025
Secretary of State
8220082163CC

Current Principal Place of Business:

719 EAST PARK AVENUE TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 13089

TALLAHASSEE, FL 32317

FEI Number: 72-1608059 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCKEE, KAYLA 719 EAST PARK AVENUE TALLAHASSEE, FL 32301 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: KAYLA MCKEE 03/28/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENTTitleTREASURERNameDICKMAN, BILLNameBROWN, RANDYAddressP.O. BOX 13089AddressP.O. BOX 13089

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title MANAGER/AGENT Title SECRETARY

Name MCKEE, KAYLA Name RAKESTRAW, ANNE

Address P.O. BOX 13089 Address P.O. BOX 13089

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

TitleVPTitleDIRECTORNameCREEL, WAYNENameJONES, LAURAAddressP.O. BOX 13089AddressP.O. BOX 13089

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

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: KAYLA MCKEE MANAGER

Electronic Signature of Signing Officer/Director Detail

03/28/2025

Date