

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011554

FILED
Jan 30, 2017
Secretary of State
CC3330091198

Entity Name: ALICIA PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

120 STRIKE EAGLE DRIVE
CRESTVIEW, FL 32536

Current Mailing Address:

PO BOX 2097
CRESTVIEW, FL 32536 US

FEI Number: 20-5078909

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEWART, MARGARET A
120 STRIKE EAGLE DRIVE
CRESTVIEW, FL 32536 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: MARGARET A. STEWART

01/30/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name STEWART, MARGARET A
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title VICE-PRESIDENT
Name HUNLEY, DARREN
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title SECRETARY
Name WALLACE, BARBARA
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title TREASURER
Name SMITH, WAYNE
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title BOARD MEMBER
Name LEMKE, KEITH
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title BOARD MEMBER
Name PREDIERI, NETTIE
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title BOARD MEMBER
Name MILLER, STACY
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

Title BOARD MEMBER
Name TREUIL, GEORGE
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536

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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: MARGARET A. STEWART

PRESIDENT

01/30/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD MEMBER
Name HANNEFIELD, LORIE
Address PO BOX 2097
City-State-Zip: CRESTVIEW FL 32536