

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011554

**FILED**  
**Mar 17, 2021**  
**Secretary of State**  
**1641292144CC**

**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

03/17/2021

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            BOARD MEMBER  
Name            EMERICK, THOMAS  
Address        PO BOX 2097  
City-State-Zip: CRESTVIEW FL 32536

Title            SECRETARY  
Name            HERBERT, CHRISTINA G  
Address        PO BOX 2097  
City-State-Zip: CRESTVIEW FL 32536

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

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

Title            BOARD MEMBER  
Name            NILLES, KIMBERLY J.  
Address        PO BOX 2097  
City-State-Zip: CRESTVIEW FL 32536

Title            VP  
Name            RODRIGUEZ, JESSE  
Address        PO BOX 2097  
City-State-Zip: CRESTVIEW FL 32536

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

*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 STEWART

**PRESIDENT**

03/17/2021

Electronic Signature of Signing Officer/Director Detail

Date