## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006979

Entity Name: HICKORY COVE OWNERS ASSOCIATION, INC.

**FILED** Mar 31, 2017 **Secretary of State** CC9239665312

# **Current Principal Place of Business:**

1211 SW BASCOM NORRIS DRIVE,

STE 201

LAKE CITY, FL 32025

# **Current Mailing Address:**

1211 SW BASCOM NORRIS DRIVE, **STE 201** LAKE CITY, FL 32025 US

FEI Number: 47-1123413

Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CASON, CARRIE C 9517 SW 34TH LANE GAINESVILLE, FL 32608 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:

DP Title Title DV

CASON, CARRIE C CASON, MATTHEW D Name Name Address 178 SW ASHEVILLE WAY Address 178 SW ASHEVILLE WAY City-State-Zip: LAKE CITY FL 32024

Title DST

City-State-Zip:

CASON, CARRIE C Name Address 178 SW ASHEVILLE WAY City-State-Zip: LAKE CITY FL 32024

LAKE CITY FL 32024

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: CARRIE CASON

03/31/2017