## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000007636

Entity Name: IDIGNITY OSCEOLA, INC.

**Current Principal Place of Business:** 

2198 4 WINDS BLVD KISSIMMEE, FL 34746

**Current Mailing Address:** 

2198 4 WINDS BLVD KISSIMMEE. FL 34746

FEI Number: 81-1929636 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOWNEY, MARY 2198 4 WINDS BLVD KISSIMMEE, FL 34746 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

**FILED** Mar 23, 2016

**Secretary of State** 

CC0981450060

Officer/Director Detail:

Title Title VΡ

BAIN, ANDREW Name KILROY, VICTORIA Name 2198 4 WINDS BLVD Address 2198 4 WINDS BLVD Address City-State-Zip: KISSIMMEE FL 34746 KISSIMMEE FL 34746 City-State-Zip:

Title Т Title S

Name HOLBORN, ROBERT ARENDAS, CHRISTINE Name Address 2198 4 WINDS BLVD Address **2198 4 WINDS BLVD** KISSIMMEE FL 34746 City-State-Zip: City-State-Zip: KISSIMMEE FL 34746

Title **DIRECTOR** 

DOWNEY, MARY Name

2198 FOUR WINDS BLVD Address City-State-Zip: KISSIMMEE FL 34746

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.

03/23/2016 SIGNATURE: MARY DOWNEY EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date