

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

DOCUMENT# N96000001172

**Entity Name:** KING'S BAY SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 14, 2021**  
**Secretary of State**  
**9208720167CC**

**Current Principal Place of Business:**

14520 SNAPPER DRIVE  
CORAL GABLES, FL 33158

**Current Mailing Address:**

14520 SNAPPER DRIVE  
CORAL GABLES, FL 33158 US

**FEI Number: 65-0739189**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CAVE CAYCEDO, VIRGINIA  
14520 SNAPPER DRIVE  
CORAL GABLES, FL 33158 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 :**

Title            D  
Name            NUNEZ, RUDY  
Address        14645 SNAPPER DR.  
City-State-Zip: CORAL GABLES FL 33158

Title            PRESIDENT  
Name            DICKINSON, ROD  
Address        6520 MAHI DRIVE  
City-State-Zip: CORAL GABLES FL 33158

Title            TREASURER  
Name            CAVE CAYCEDO, VIRGINIA  
Address        14520 SNAPPER DRIVE  
City-State-Zip: CORAL GABLES FL 33158

Title            VP  
Name            MARONTO, MILES  
Address        6230 DOLPHIN DR.  
City-State-Zip: CORAL GABLES FL 33158

Title            DIRECTOR  
Name            HILL, DAVE  
Address        6601 MARLIN DRIVE  
City-State-Zip: CORAL GABLES FL 33158

*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: VIRGINIA CAVE CAYCEDO**

**TREASURER**

**04/14/2021**

Electronic Signature of Signing Officer/Director Detail

Date