### **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000001479

Entity Name: ST. JOHNS CAY HOMEOWNERS' ASSOCIATION, INC.

FILED
Apr 30, 2019
Secretary of State
2241326164CC

# **Current Principal Place of Business:**

12620-3 BEACH BLVD. #301 JACKSONVILLE. FL 32246

## **Current Mailing Address:**

12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246 US

FEI Number: 59-3532114 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

JARNUTOWSKI, SHERRIE 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246 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: SHERRIE JARNUTOWSKI 04/30/2019

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title	PRESIDENT	Title	DIRECTOR
Name	AIDINEJAD, HAMID	Name	BORK, DUANE P

Address 12620-3 BEACH BLVD. #301 Address 12620-3 BEACH BLVD. #301

City-State-Zip: JACKSONVILLE FL 32246

City-State-Zip: JACKSONVILLE FL 32246

Title TREASURER Title SECRETARY

Name ADHIKARI, RAJ R Name FULLER, LORENZO

Address 12620-3 BEACH BLVD. #301 Address 12620-3 BEACH BLVD. #301

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

TitleDIRECTORTitleDIRECTORNameNEGRON, JOSENameALLEN, JOHN

Address 12620-3 BEACH BLVD. #301 Address 12620-3 BEACH BLVD. #301
City-State-Zip: JACKSONVILLE FL 32246
City-State-Zip: JACKSONVILLE FL 32246

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: HAMID AIDINEJAD PRESIDENT 04/30/2019