

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2007 8:00 am
Secretary of State

02-27-2007 90002 003 ****61.25

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02022007 Chg-NP CR2E037 (12/06)

DOCUMENT # N02000004272 1. Entity Name OLD FLORIDA VILLAGE OWNERS' ASSOCIATION, INC.																																																																																																																																																					
Principal Place of Business 3320 W COUNTY HWY 30-A SANTA ROSA BEACH, FL 32459			Mailing Address 3320 W COUNTY HWY 30-A SANTA ROSA BEACH, FL 32459																																																																																																																																																		
2. Principal Place of Business - No P.O. Box # <i>127 HIDDEN Lake Way</i> Suite, Apt. #, etc.		3. Mailing Address <i>127 HIDDEN Lake Way</i> Suite, Apt. #, etc.																																																																																																																																																			
City & State <i>Santa Rosa Beach, FL</i> Zip <i>32459</i>		City & State <i>Santa Rosa Beach, FL</i> Zip <i>32459</i>		4. FEI Number 04-3766247																																																																																																																																																	
Country <i>USA</i>		Country <i>USA</i>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent FRANKLIN H. WATSON, P.A. 5365 E CTY HWY 30-A STE 105 SEAGROVE BEACH, FL 32459				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																																																	
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																																																					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <div style="float: right;">DATE _____</div>																																																																																																																																																					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																																																	
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PRESIDENT</td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Michelle Myers</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>502 HIDDEN Lake Way</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Santa Rosa Beach, FL 32459</td> <td></td> </tr> <tr> <td>TITLE</td> <td>3rd Vice President</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Jack McManus</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5205 Harbour Ridge Drive</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Alpharetta, GA 30005</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Secretary</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Mary Barrett</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2301 Rockview Lane</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Birmingham, AL 35226</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Treasurer</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Pat Barrett</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2301 Rockview Lane</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Birmingham, AL 35226</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Member at Large</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Eric Jackson</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>9476 Johnson Road Extended</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>German town, TN 38139</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PD	<input checked="" type="checkbox"/> Delete	NAME	MATHEWS, MAX JR		STREET ADDRESS	3320 W COUNTY HWY 30-A		CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459		TITLE	VD	<input checked="" type="checkbox"/> Delete	NAME	MATHEWS, MAX SR		STREET ADDRESS	3320 W COUNTY HWY 30-A		CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459		TITLE	STD	<input checked="" type="checkbox"/> Delete	NAME	MATHEWS, JAMES A		STREET ADDRESS	3320 W COUNTY HWY 30-A		CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	Michelle Myers		STREET ADDRESS	502 HIDDEN Lake Way		CITY-ST-ZIP	Santa Rosa Beach, FL 32459		TITLE	3rd Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	Jack McManus		STREET ADDRESS	5205 Harbour Ridge Drive		CITY-ST-ZIP	Alpharetta, GA 30005		TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	Mary Barrett		STREET ADDRESS	2301 Rockview Lane		CITY-ST-ZIP	Birmingham, AL 35226		TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	Pat Barrett		STREET ADDRESS	2301 Rockview Lane		CITY-ST-ZIP	Birmingham, AL 35226		TITLE	Member at Large	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	Eric Jackson		STREET ADDRESS	9476 Johnson Road Extended		CITY-ST-ZIP	German town, TN 38139		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																																					
SIGNATURE: _____ <i>President</i> 2/15/07 850974-5115 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="float: right;"> <small>Date</small> <small>Daytime Phone #</small> </div>																																																																																																																																																					