2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004272

FILED Apr 01, 2009 Secretary of State

Entity Name: OLD FLORIDA VILLAGE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

127 HIDDEN LAKE WAY

SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

PO BOX 4762

SANTA ROSA BEACH, FL 32459

FEI Number: 04-3766247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOLPHIN DEVELOPERS, LLC 5008 HWY 98 WEST SUITE 2B SANTA ROSA BEACH, FL 32459 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:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

GERMANTOWN, TN 38139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

EATONTON, GA 31024

Title: P () Delete Title: P (X) Change () Addition
Name: BREMER, SUSAN Name: HARRINGTON, JAMES
Address: 256 HIDDEN LAKE MAY

 Address:
 5272 CHESTNUT TR.
 Address:
 256 HIDDEN LAKE WAY

 City-St-Zip:
 BIRMINGHAM, AL 35244
 City-St-Zip:
 SANTA ROSA BEACH, FL 32459

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 JACKSON, ERIC
 Name:
 HOWER, DIANE

 Address:
 9476 JOHNSON RD. EXTENDED
 Address:
 92 WHITNEY ST.

Title: S () Delete Title: S (X) Change () Addition

 Name:
 TORR, STEPHANIE
 Name:
 ANDREWS, LYNNE

 Address:
 11944 ESTY WAY
 Address:
 6735 NATURE VIEW WAY

 City-St-Zip:
 CARMEL, IN 46033
 City-St-Zip:
 CUMMING, GA 30040

(X) Change () Addition Title: Title: () Delete Name: MCMANUS, KRISTINA Name: JACKSON, COURTNEY 5205 HARBOUR RIDGE DR. 5400 PRESERVE PKWY SO Address: Address: City-St-Zip: ALPHARETTA, GA 30005 City-St-Zip: GREENWOOD VILLAGE, CO 80121

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BASS, TRIPP
 Name:
 CARRUTHERS, BUTCH

 Address:
 910 THREE NOTCH CT
 Address:
 7875 BRUNSICK RD.

 City-St-Zip:
 ANDALUSIA, AL 36420
 City-St-Zip:
 MILINGTON, TN 38053

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ALAN BRUNI MGR 04/01/2009

Electronic Signature of Signing Officer or Director

Date