

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 30, 2009
Secretary of State

DOCUMENT# N02000004272

Entity Name: OLD FLORIDA VILLAGE OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**127 HIDDEN LAKE WAY
SANTA ROSA BEACH, FL 32459**New Principal Place of Business:****Current Mailing Address:**PO BOX 4762
SANTA ROSA BEACH, FL 32459**New Mailing Address:****FEI Number:** 04-3766247**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DOLPHIN DEVELOPERS, LLC
5008 HWY 98 WEST
SUITE 2B
SANTA ROSA BEACH, FL 32459 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARRINGTON, JAMES
Address: 256 HIDDEN LAKE WAY
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP () Delete
Name: HOWER, DIANE
Address: 92 WHITNEY ST.
City-St-Zip: EATONTON, GA 31024

Title: S () Delete
Name: ANDREWS, LYNNE
Address: 6735 NATURE VIEW WAY
City-St-Zip: CUMMING, GA 30040

Title: T () Delete
Name: JACKSON, COURTNEY
Address: 5400 PRESERVE PKWY SO
City-St-Zip: GREENWOOD VILLAGE, CO 80121

Title: D () Delete
Name: CARRUTHERS, BUTCH
Address: 7875 BRUNSICK RD.
City-St-Zip: MILLINGTON, TN 38053

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CARRUTHERS, BUTCH
Address: 7875 BRUNSICK RD.
City-St-Zip: MILLINGTON, TN 38053

Title: T (X) Change () Addition
Name: MYERS, MICHELLE
Address: 502 HIDDEN LAKE WAY
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Change () Addition
Name: BEVERLY, DOUG
Address: 2713 TREYBURN LN.
City-St-Zip: HAMPTON COVE, AL 35763

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.

10/30/2009

Electronic Signature of Signing Officer or Director

Date