

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003893

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** BIRCHWOOD AT LIVE OAK PRESERVE ASSOCIATION, INC.

**Current Principal Place of Business:**

20127 BAY CEDAR AVE  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

20127 BAY CEDAR AVE  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 20-2690834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STAHLMAN, CHAD  
20127 BAY DEDAR AVE  
TAMPA, FL 33647 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  
Name: STAHLMAN, CHAD  
Address: 20127 BAY CEDAR AVE  
City-St-Zip: TAMPA, FL 33647

Title: VP  
Name: OZGOL, DEBBIE  
Address: 20170 BAY CEDAR AVE  
City-St-Zip: TAMPA, FL 33647

Title: MRS.  
Name: BLANCHARD, LINDA K  
Address: 20172 BAY CEDAR AVE  
City-St-Zip: TAMPA, FL 33647

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: CHAD STAHLMAN

PRES

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date