

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003508

FILED
Apr 19, 2012
Secretary of State

Entity Name: N. W. 55TH PLACE LAND CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5132 CENTENNIAL OAKS CIRCLE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

5132 CENTENNIAL OAKS CIRCLE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NEWTON, SYBIL C
5132 CENTENNIAL OAKS CIRCLE
TALLAHASSEE, FL 32308 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: DT
Name: NEWTON, SYBIL C
Address: 5132 CENTENNIAL OAKS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: LETCHWORTH, CHARLENE N
Address: 3920 THREE CHIMNEYS LANE
City-St-Zip: CUMMINGS, GA 30041

Title: D
Name: NEWTON, WILLIAM P
Address: 27 HAMPTON LANE
City-St-Zip: CARTERSVILLE, GA 30120

Title: DP
Name: NEWTON, TIMOTHY E
Address: 4397 VETERANS MEMORIAL HWY, COUNTY RD 59
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS
Name: LAMB, KAREN N
Address: 217 PINEWOOD DR
City-St-Zip: TALLHASSEE, FL 32303

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: TIMOTHY E. NEWTON

DP

04/19/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date