

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29115

FILED
Mar 23, 2011
Secretary of State

Entity Name: OX BOTTOM MANOR COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1607 VILLAGE SQ BLVD
STE 8
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15456
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-2948258 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EDDY, MARIE M
1607 VILLAGE SQ BLVD
STE 8
TALLAHASSEE, FL 32309 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: D
Name: ERVIN, MARK
Address: 281 THORNBERG DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: ELSBERRY, SHARON
Address: 5952 OX BOTTOM MANOR DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: PD
Name: HICKS, ROBERT
Address: 6364 BELGRAND DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: MCCLEAN, FRANK
Address: 493 MEADOW RIDGE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: SPOOK, STEVE
Address: 546 MEADOW RIDGE DR
City-St-Zip: TALLAHASSEE, FL 32312

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: MARIE EDDY

MGR

03/23/2011

Electronic Signature of Signing Officer or Director

Date