

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003177

FILED
Mar 30, 2010
Secretary of State

Entity Name: CAMELLIA ACRES/GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2566 WOODS VIEW DR.
MARIANNA, FL 32446

New Principal Place of Business:

Current Mailing Address:

2566 WOODS VIEW DR.
MARIANNA, FL 32446

New Mailing Address:

FEI Number: 59-3343041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, HELEN T
2566 WOODS VIEW DR.
MARIANNA, FL 32446 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: PD
Name: ARGO, LORENA
Address: 2514 WOODSVIEW DR.
City-St-Zip: MARIANNA, FL 32446

Title: D
Name: PENDERGRASS, DWAIN
Address: 4541 WOODS VIEW DR.
City-St-Zip: MARIANNA, FL 32446

Title: S
Name: SULLIVAN, LINDA
Address: 2510 WOODS VIEW DR.
City-St-Zip: MARIANNA, FL 32446

Title: D
Name: JOHNSON, ALICE D
Address: 2534 WOODS VIEW DRIVE
City-St-Zip: MARIANNA, FL 32446

Title: VD
Name: REDMOND, ROBERT
Address: 4950 WATER OAK DRIVE
City-St-Zip: MARIANNA, FL 32446

Title: D
Name: SANDIFER, TRINKA
Address: 4955 WATER OAK DRIVE
City-St-Zip: MARIANNA, FL 32446

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: HELEN T. HERNANDEZ

T

03/30/2010

Electronic Signature of Signing Officer or Director

Date