# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 11, 2010**
**Secretary of State**

DOCUMENT# N96000004321

**Entity Name:** THE ELIZA VARNES NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

3802 HIGHVIEW ROAD
SEFFNER, FL 33584

**New Principal Place of Business:**

**Current Mailing Address:**

3802 HIGHVIEW ROAD
SEFFNER, FL 33584

**New Mailing Address:**

**FEI Number: 59-3410094** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ANDERSON, CHARLOTTE I
3802 HIGHVIEW ROAD
SEFFNER, FL 33584 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: TD
Name: KEMP, CHRISTINE
Address: 1909 S. OAK ST.
City-St-Zip: SEFFNER, FL 33584

Title: VCD
Name: EDWARDS, BETTY
Address: 3804 HIGHVIEW RD
City-St-Zip: SEFFNER, FL 33584

Title: CS
Name: ANDERSON, CHARLOTTE I
Address: 3802 HIGHVIEW ROAD
City-St-Zip: SEFFNER, FL 33584

Title: DS
Name: PHILON, MARIA
Address: 1212 VARNES ALLEY
City-St-Zip: SEFFNER, FL 33584

Title: D
Name: KIRKLAND, NANCY
Address: 323 TITIAN ROAD
City-St-Zip: SEFFNER, FL 33584

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: CHARLOTTE I. ANDERSON P 04/11/2010

Electronic Signature of Signing Officer or Director — Date