

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 30, 2009  
Secretary of State

DOCUMENT# N97000002030

Entity Name: OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD ASSOCIATION, INC.

## Current Principal Place of Business:

HAYDEN & ASSOC  
8359 BEACON BLVD STE 213  
FORT MYERS, FL 33907 US

## New Principal Place of Business:

C/O COMPASS GROUP  
3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103 US

## Current Mailing Address:

HAYDEN & ASSOC  
8359 BEACON BLVD STE 213  
FORT MYERS, FL 33907 US

## New Mailing Address:

C/O COMPASS GROUP  
3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103 US

FEI Number: 65-0785766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAYDEN & ASSOC  
8359 BEACON BLVD STE 213  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

COMPASS GROUP  
3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103 US

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: JEFF MITCHELL

04/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DINAN, TOM  
Address: 7058 SUGAR MAGNOLIA CIR  
City-St-Zip: NAPLES, FL 34109

Title: VP ( ) Delete  
Name: GATLIN, CLYDE  
Address: 6464 AUTUMN WOODS BLVD  
City-St-Zip: NAPLES, FL 34109

Title: ST ( ) Delete  
Name: NOONAN, LINDA  
Address: 6551 MANGROVE WAY  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: WILLIAMS, BRUCE  
Address: 7025 SUGAR MAGNOLIA CIR  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: DEPERI, CHARLIE  
Address: 7062 SUGAR MAGNOLIA CIR  
City-St-Zip: NAPLES, FL 34109

Title: PM (X) Delete  
Name: HAYDEN, KEN  
Address: 8359 BEACON BLVD STE 213  
City-St-Zip: FORT MYERS, FL 33907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DINAN, THOMAS  
Address: 7058 SUGAR MAGNOLIA CIR  
City-St-Zip: NAPLES, FL 34109

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: CAROZZA, ARLENE  
Address: 6611 CHESTNUT CIRCLE  
City-St-Zip: NAPLES, FL 34109

Title: S (X) Change ( ) Addition  
Name: WILLIAMS, BRUCE  
Address: 7025 SUGAR MAGNOLIA CIR  
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change ( ) Addition  
Name: BEAUREGARD, ROBERT  
Address: 6347 OLD MAHOGANY COURT  
City-St-Zip: NAPLES, FL 34109

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS DINAN

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date