## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N99000002826

TI FILED
Jul 08, 2007
Secretary of State

Entity Name: VILLAGES OF ST. MARKS PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

431 WAVERLY ROAD TALLAHASSEE, FL 32312

Current Mailing Address: New Mailing Address:

431 WAVERLY ROAD TALLAHASSEE, FL 32312

FEI Number: 59-3663031 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ISAACS, DAN L 431 WAVERLY ROAD TALLAHASSEE, FL 32312 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DP () Delete Title: DP (X) Change () Addition

 Name:
 BUNKER, CLEMENTINE
 Name:
 PICHARD, KEVIN

 Address:
 38 BURNTPINE LOOP
 Address:
 2956 WOODRICH DRIVE

 City-St-Zip:
 ST MARKS FL 32355, FL 32355
 City-St-Zip:
 TALLAHASSEE, FL 32301

Title: DVP ( ) Delete Title: DS (X) Change ( ) Addition Name: BUDA, STACEY BUDA, STACEY

 Address:
 58 BURNTPINE LOOP
 Address:
 58 BURNTPINE LOOP

 City-St-Zip:
 ST MARKS FL 32355, FL 32355
 City-St-Zip:
 ST MARKS FL 32355, FL 32355

Title: DS ( ) Delete Title: DVP (X) Change ( ) Addition
Name: CASEY, LARRY Name: CASEY, LARRY

Address: P.O. BOX 826

 Address:
 P.O. BOX 826
 Address:
 P.O. BOX 826

 City-St-Zip:
 WACISSA, FL 32361
 City-St-Zip:
 WACISSA, FL 32361

Title: DT ( ) Delete Title: DT (X) Change ( ) Addition

 Name:
 PICHARD, KEVIN
 Name:
 BUNKER, CLEMENTINE

 Address:
 2956 WOODRICH DRIVE, APT A
 Address:
 38 BURNT PINE LOOP

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 ST. MARKS, FL 32355

 Name:
 GAGLIARDI, RON
 Name:
 RYDER, WILLIAM

 Address:
 P.O. BOX 74
 Address:
 1508 CHINA TRAIL GROVE

 City-St-Zip:
 ST. MARKS, FL 32355
 City-St-Zip:
 TALLAHASSEE, FL 32301

Title: D () Delete Title: () Change () Addition

 Name:
 JOHNSON, TOMMY
 Name:

 Address:
 P.O. BOX 776
 Address:

 City-St-Zip:
 CRAWFORDVILLE, FL 32326
 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: PRESIDENT DP 07/08/2007