2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001037

FILED Apr 02, 2009 Secretary of State

Entity Name: THE COUNTRY CLUB OF OCALA PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 25 E. SILVER SPRINGS BLVD 2123 SW 20TH PLACE OCALA, FL 34470 OCALA, FL 34471 **Current Mailing Address: New Mailing Address:** 25 E. SILVER SPRINGS BLVD 2123 SW 20TH PLACE OCALA, FL 34471 OCALA, FL 34470 FEI Number: 59-3518001 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: BOSSHARDT PROPERTY MANAGEMENT, INC. BOSSHARDT PROPERTY MANAGEMENT, INC. 25 E. SILVER SPRINGS BLVD. 2123 SW 20TH PLACE OCALA, FL 34470 OCALA, FL 34471 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: GARRY H. GRIFFIN 04/02/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LEFEVER, EDWARD Name: Name: 1301 SE 73RD PL Address: Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: Title: Title: () Delete () Change () Addition PERKINS, CARTER JR. Name: Name: Address: 7308 SE 12 CIRCLE Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: Title: () Delete Title: (X) Change () Addition WOLLETT, FRED Name: WATSON, ROZ Name: 6950 SE 12 TERR 7139 SE 14TH COURT Address: Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: OCALA, FL 34480 Title: () Delete Title: (X) Change () Addition Name: HENSLEY, JOE Name: CHITTY, RICHARD Address: 7855 SE 12 CIR Address: 6919 SE 12 CIRCLE City-St-Zip: OCALA, FL 34480 City-St-Zip: OCALA, FL 34480 Title: () Delete Title: (X) Change () Addition ANKOVIAK, JAMES MAGUIRE, DONNA Name: Name: 2901 SW 41ST ST, # 2403 7567 SE 12TH CIRCLE Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34480 Title: () Delete Title: (X) Change () Addition CAPLAN, BRUCE DOLIN. LOIS Name: Name: Address: 7302 SE 12 CIRCLE Address: 1450 SE 73 PLACE OCALA, FL 34480 OCALA, FL 34480 City-St-Zip: 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: ROZ WATSON P 04/02/2009