

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24078

FILED
Feb 09, 2012
Secretary of State

Entity Name: VALLEY DALE ACRES CIVIC ASSOCIATION INCORPORATED

Current Principal Place of Business:

37544 ATTICA AVENUE
ZEPHYRHILLS, FL 33542 US

New Principal Place of Business:

Current Mailing Address:

37544 ATTICA AVENUE
ZEPHYRHILLS, FL 33542 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARSHALL, RAYMOND P/D
37544 ATTICA AVENUE
ZEPHYRHILLS, FL 33542 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: D
Name: WALLS, DEAN D
Address: 37446 ATTICA AVENUE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: ST/D
Name: CLARK, SHEILA ST/D
Address: 37417 ATTICA AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D
Name: BAILEY, NANCY D
Address: 37523 ATTICA AVENUE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D
Name: JENNINGS, ESTER D
Address: 37529 ATTICA AVE.
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP/D
Name: KENNEDY, JIM VP/D
Address: 37452 ATTICA AVENUE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D
Name: MUNSON, SALLY D
Address: 37411 ATTICA AVENUE
City-St-Zip: ZEPHYRHILLS, FL 33542

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: SHEILA CLARK

ST/D

02/09/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date