2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002030

Entity Name: OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD

ASSOCIATION, INC.

Apr 29, 2014 **Secretary of State** CC3491193027

FILED

Current Principal Place of Business:

C/O COMPASS GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103

Current Mailing Address:

C/O COMPASS GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 US

FEI Number: 65-0785766 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GOEDE & ADAMCZYK, PLLC 8950 FONTANA DEL SOL WAY S. NAPLES, FL 34109 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:

Date

Officer/Director Detail:

Title Title DIRECTOR

GATLIN, CLYDE Name BROWN, JIM Name

C/O COMPASS GROUP C/O COMPASS GROUP Address Address

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

VΡ Title TREASURER Title

Name DINAN, TOM Name BURTON, DAVID

Address C/O COMPASS GROUP Address C/O COMPASS GROUP

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

NAPLES FL 34103 NAPLES FL 34103 City-State-Zip: City-State-Zip:

Title SECRETARY

Name MALTEMPO, GORDON Address C/O COMPASS GROUP

4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103

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: JIM BROWN **PRESIDENT** 04/29/2014