


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 02, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 711161</b> 1. Entity Name <b>OLS HOME ASSOCIATION, INC.</b>	
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Principal Place of Business <b>P O BOX 861 KILMARNOCH ROAD TITUSVILLE FL 32781</b>	Mailing Address <b>P O BOX 861 KILMARNOCH ROAD TITUSVILLE FL 32781</b>
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E037 (10/06)

<b>6. Name and Address of Current Registered Agent</b>  <b>GRIFFO, FRANK D 1639 HARRISON ST TITUSVILLE FL 32780</b>	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
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4. FEI Number <b>23-7075601</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
TITLE	VD <input type="checkbox"/> Delete HEFFERNAN, JAMES E 572 GARDENIA CIR TITUSVILLE, FL 00000
TITLE	SD <input type="checkbox"/> Delete KETCHAM, CHARLES R 1959 SQUIRES CT TITUSVILLE FL
TITLE	TD <input type="checkbox"/> Delete WEIST, EDWARD G 625 LAKEWOOD LANE TITUSVILLE FL
TITLE	PD <input type="checkbox"/> Delete SIMPSON, RICHARD A 3460 KILMARNOCH RD TITUSVILLE FL
TITLE	VD <input type="checkbox"/> Delete ABATE, PAUL 1245 RANCHED AVE. TITUSVILLE FL 32780
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition U00000619080 02/08/07-80056-015 61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** James E. Heffernan 1-30-07 321-269-4218