## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#716769** 

FILED Feb 05, 2009 Secretary of State

Entity Name: OKLAWAHA RIVER VALLEY CIVIC CLUB, INC.

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

23125 NE 160 AVE. RD. FORT MCCOY, FL 32134

**Current Mailing Address: New Mailing Address:** 

23125 NE 160 AVE. RD FORT MCCOY, FL 32134

FEI Number: 59-2951312 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:

KING, WILLIAM A 7 E. SILVER SPRINGS BLVD. SUITE 500 OCALA, FL 34470 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:

(X) Change ( ) Addition () Delete GRIFFIN, MIKE SOSA, MITCHELL D Name: Name: 14531 NE 190 LANE Address: 16781 NE 243RD PLACE RD. Address: FT MCCOY, FL 32134 FT MCCOY, FL 32134 City-St-Zip: City-St-Zip:

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

SOSA, MITCHELL D Name: SOLERO, TINA Name:

Address: 16781 NE 243RD PLACE RD Address: 14985 NE 200TH AVENUE City-St-Zip: FORT MC COY, FL 32134 City-St-Zip: FORT MCCOY, FL 32134

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

SOSA, MARISOL Name: Name: 16781 NE 243RD PLACE RD Address: Address: City-St-Zip: FORT MC COY, FL 32134 City-St-Zip:

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

Name: SOLERO, TINA Name: SOLERO, TINA Address: 14985 NE 200 AVENUE Address: 14985 NE 200 AVENUE City-St-Zip: FORT MC COY, FL 32134 City-St-Zip: FORT MC COY, FL 32134

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

FOY, SHANNON CARTER, GAIL Name: Name:

14695 NE 206 PLACE 14390 NE 188TH PLACE RD Address: Address:

City-St-Zip: FT MCCOY, FL 32134 City-St-Zip: FT MCCOY, FL 32134

Title: () Delete Title: (X) Change ( ) Addition LAUCK, SHELBY

LAUCK, SHELBY Name: Name: Address: 14500 NE 213 LANE Address: P. O. BOX 1682

SILVER SPRINGS, FL 34489 FORT MC COY, FL 32134 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: MARISOL SOSA Т 02/05/2009