

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726789

FILED
Jan 06, 2011
Secretary of State

Entity Name: FOUR MILE VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

401 VILLAGE ROAD
FOUR MILE VILLAGE
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

401 VILLAGE ROAD
FOUR MILE VILLAGE
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-1907997 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARICE, HARVEY P TREAS.
754 VILLAGE RD
SANTA ROSA BEACH, FL 32459 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: PD
Name: VOSBEIN, ROBERT
Address: 61 VILLAGE BEACH WEST
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: CHAMBERS, MOLLY
Address: 2751 REGATTA WAY
City-St-Zip: TUSCALOOSA, AL 35406

Title: VD
Name: PATTON, JOHN
Address: 205 VILLAGE BEACH WEST
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T
Name: MARICE, HARVEY
Address: 754 VILLAGE RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: PATTEN, DONNA
Address: 175 MISSILE HILL ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: SD
Name: FREDERICK, LYNNE
Address: 314 MISELTOE
City-St-Zip: GADSDEN, AL 35901

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: HARVEY P. MARICE

TREA

01/06/2011

Electronic Signature of Signing Officer or Director

_____ Date