

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728542

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** LOS ROBLES NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

1509 FERNANDO DRIVE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

1509 FERNANDO DRIVE  
TALLAHASSEE, FL 32303

**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:**

DEHAVEN, CAROLYN L  
1509 FERNANDO DRIVE  
TALLAHASSEE, FL 32303 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: P  
Name: DIXON, DON  
Address: 1552 CRISTOBAL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: V  
Name: MICK, SLAGER  
Address: 1546 CRISTOBAL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S  
Name: SLAGER, FRAN  
Address: 1546 CRISTOBAL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: T  
Name: DEHAVEN, CAROLYN L  
Address: 1509 FERNANDO DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

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: C. DEHAVEN

T

01/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date