## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 737657** 

FILED Jan 13, 2011 Secretary of State

Entity Name: THE VILLAGE HOME OWNERS ASSOCIATION OF OCALA, INC.

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

3802-3876 NE 17TH ST CIR OCALA, FL 34470 US

Current Mailing Address: New Mailing Address:

PO BOX 284 P.O. BOX 284

SILVER SPGS., FL 344890284 US SILVER SPRINGS, FL 344890284

FEI Number: 59-1784497 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:

CHILDERS, PHILIP CRAWFORD, PAUL
3858 NE 17TH CIR 3818 NE 17TH STREET CIRCLE
OCALA, FL 34470 US 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: PAUL CRAWFORD 01/13/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

 Name:
 CHILDERS, CHARLOTTE

 Address:
 3858 NE 17TH ST CIR

 City-St-Zip:
 OCALA, FL 34470

Title: 7

 Name:
 MULLIN, JANET

 Address:
 3835 NE 17 ST CIRCLE

 City-St-Zip:
 OCALA, FL 34470

Title: SD

 Name:
 MCDONALD, CAROLE

 Address:
 3824 NE 17 ST CIR

 City-St-Zip:
 OCALA, FL 34470

Title:

 Name:
 RANIELLA, BRUCE

 Address:
 3828 NE 17 ST CR

 City-St-Zip:
 OCALA, FL 34470

Title: VP

 Name:
 CRAWFORD, PAUL

 Address:
 3818 NE 17 ST CIR

 City-St-Zip:
 OCALA, FL 34470

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: PAUL CRAWFORD VP 01/13/2011