

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737657

FILED
Jan 03, 2012
Secretary of State

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 284
SILVER SPRINGS, FL 344890284

New Mailing Address:

FEI Number: 59-1784497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, PAUL
3818 NE 17TH STREET CIRCLE
OCALA, FL 34470 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: VP
Name: CHILDERS, CHARLOTTE
Address: 3858 NE 17TH ST CIR
City-St-Zip: OCALA, FL 34470

Title: SD
Name: DILIMONE, KAY
Address: 3833 NE 17 ST CIRCLE
City-St-Zip: OCALA, FL 34470

Title: TD
Name: MCDONALD, CAROLE
Address: 3824 NE 17 ST CIR
City-St-Zip: OCALA, FL 34470

Title: D
Name: RANIELLA, BRUCE
Address: 3828 NE 17 ST CR
City-St-Zip: OCALA, FL 34470

Title: PRES
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

PRES

01/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date