

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762682

FILED
Apr 16, 2009
Secretary of State

Entity Name: TWELVE OAKS ASSOCIATION, INC.

Current Principal Place of Business:

4213 COUNTY ROAD 218
SUITE 1
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

4213 COUNTY ROAD 218
SUITE 1
MIDDLEBURG, FL 32068

New Mailing Address:

FEI Number: 59-2282933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELCOMYN, VINA C
4213 C.R. 218
SUITE 1
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

AWAKENINGS ASSOCIATION MANAGEMENT, INC
4213 C.R. 218
SUITE 1
MIDDLEBURG, FL 32068 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: VINA C DELCOMYN 04/16/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ELDER, NANCY
Address: 2300 TWELVE OAKS DRIVE C3
City-St-Zip: ORANGE PARK, FL 32065

Title: DS () Delete
Name: DILORETO, JANE
Address: 1405 KINGSLEY AVENUE
City-St-Zip: ORANGE PARK, FL 32073

Title: DT () Delete
Name: TERRY, KIM E
Address: 4268 POWDER HORN COURT
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: DRIGGER, KIM E
Address: 4268 POWDER HORN COURT
City-St-Zip: MIDDLEBURG, FL 32068

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: NANCY ELDER PRES 04/16/2009
Electronic Signature of Signing Officer or Director Date