

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764130

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** GREEN ARBOR OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1019 4TH AVE  
SHALIMAR, FL 32579 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1174  
SHALIMAR, FL 325795174 US

**New Mailing Address:**

**FEI Number:** 59-2341711

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COTHERN, BEN  
1019 4TH AVE  
SHALIMAR, FL 32579 US

**Name and Address of New Registered Agent:**

BRANNON, CHRIS  
905 LAUDERHILL LANE  
FORT WALTON BEACH, FL 32547 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: CHRIS BRANNON

04/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: COTHERN, BEN  
Address: 1019 4TH AVE  
City-St-Zip: SHALIMAR, FL 32579

Title: SD  
Name: JOHNS, LORRIE  
Address: 1080 5TH AVE  
City-St-Zip: SHALIMAR, FL 32579

Title: VD  
Name: RETZLAFF, DOROTHY  
Address: 1047 10TH ST.  
City-St-Zip: SHALIMAR, FL 32579

Title: D  
Name: GARDNER, JOHN  
Address: 1076 5TH AVENUE  
City-St-Zip: SHALIMAR, FL 32579

Title: TD  
Name: MILLS, VIRGINIA  
Address: 1049 10TH ST  
City-St-Zip: SHALIMAR, FL 32579

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: BEN COTHERN

P

04/29/2010

Electronic Signature of Signing Officer or Director

Date