

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765161

FILED
Mar 13, 2009
Secretary of State

Entity Name: SHAW FARMS OF ALACHUA OWNERSHIP ASSOCIATION, INC

Current Principal Place of Business:

P.O. BOX 95
ALACHUA, FL 32616 US

New Principal Place of Business:

12215 NW 122 TERRACE
ALACHUA, FL 32616 US

Current Mailing Address:

P.O. BOX 95
ALACHUA, FL 32616 US

New Mailing Address:

P.O. BOX 95
ALACHUA, FL 32615

FEI Number: 59-2630194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTES, ROBERT M.
12208 NW 129TH TERRACE
ALACHUA, FL 32615 US

Name and Address of New Registered Agent:

PORTER, MICHAEL PRES
12215 NW 122 TERRACE
ALACHUA, FL 32615 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: MICHAEL PORTER, PRESIDENT

03/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ESTES, ROBERT M.
Address: 12208 NW 129 TERR
City-St-Zip: ALACHUA, FL

Title: D () Delete
Name: REESE, WILLIAM
Address: 12705 NW 116TH PLACE
City-St-Zip: ALACHUA, FL 32615

Title: DST () Delete
Name: ESTES, KAY L
Address: 12208 NW 129TH TERRACE
City-St-Zip: ALACHUA, FL 32615

Title: D () Delete
Name: CLENDENIN, PAUL
Address: 13018 N.W. 123RD PLACE
City-St-Zip: ALACHUA, FL 32615

Title: D () Delete
Name: PORTER, MICHAEL
Address: 12215 N.W. 122ND TERRACE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PORTER, MICHAEL
Address: 12215 NW 122 TERR
City-St-Zip: ALACHUA, FL

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

Title: S (X) Change () Addition
Name: SCHILLE, LORI
Address: 13026 NW 123 PLACE
City-St-Zip: ALACHUA, FL 32615

Title: VP (X) Change () Addition
Name: CLENDENIN, PAUL
Address: 13018 N.W. 123RD PLACE
City-St-Zip: ALACHUA, FL 32615

Title: T (X) Change () Addition
Name: MARZAK, EILEEN M
Address: 11802 N.W. 129 TERRACE
City-St-Zip: ALACHUA, FL 32615

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: EILEEN M MARZAK

T

03/13/2009

Electronic Signature of Signing Officer or Director

Date