

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765436

FILED  
Apr 23, 2008  
Secretary of State

**Entity Name:** MARION COUNTY ROADBUILDERS ASSOCIATION, INC.

**Current Principal Place of Business:**

9330 SE 7 AVE.  
OCALA, FL 34480 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2973  
OCALA, FL 344792973 US

**New Mailing Address:**

**FEI Number:** 59-2252782

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEAN & DEAN, LLP  
230 NE 25TH AVE  
OCALA, FL 344707075 US

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

SMITH, VICKI L  
9330 SE 7 AVE.  
OCALA, FL 34480 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: VICKI L. SMITH

04/23/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COUNTS, STEVEN C  
Address: 16611 SE 58 AVE.  
City-St-Zip: SUMMERFIELD, FL 34491

Title: VPD ( ) Delete  
Name: YARBROUGH, DEAN  
Address: 2300 SW 3 AVE  
City-St-Zip: OCALA, FL 34474

Title: SD ( ) Delete  
Name: THOMPSON, GEORGE  
Address: 10060 NW HWY 225A  
City-St-Zip: OCALA, FL 34482

Title: TD (X) Delete  
Name: COUNTS, TOBY  
Address: 3021 NW 21 ST.  
City-St-Zip: OCALA, FL 34475

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: YARBROUGH, DEAN  
Address: 2300 SW 3 AVE.  
City-St-Zip: OCALA, FL 34474

Title: SD (X) Change ( ) Addition  
Name: SALSER, STAN  
Address: 2150 NW MARTIN LUTHER KING JR AVE  
City-St-Zip: OCALA, FL 34475

Title: TD (X) Change ( ) Addition  
Name: BELL, CHARLES  
Address: 4260 NE 35 ST  
City-St-Zip: OCALA, FL 34479

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

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: DEAN YARBROUGH

PD

04/23/2008

Electronic Signature of Signing Officer or Director

Date