

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90032 017 ****70.00

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1. Entity Name

BUCKWOOD HOMES ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 12805
TALLAHASSEE FL 32317

Mailing Address

P.O. BOX 12805
TALLAHASSEE FL 32317



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number
59-2266119

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOWELL, BERNADINE MGR
1908 S. BARNWAY
TALLAHASSEE FL 32317

7. Name and Address of New Registered Agent

Name

Same

Street Address (P.O. Box Number is Not Acceptable)

2004 Ambrose Court

City

Tall FL

FL

Zip Code

32308

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date of application

(NOTE: Registered Agent Signature and Seal are not required)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008 *\$70.00*

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	AT	☒ Delete
NAME	ROUSE, DAN	
STREET ADDRESS	3962 BOTHWELL TERRACE	
CITY- ST- ZIP	TALLAHASSEE FL 32317	
TITLE	VP	☐ Delete
NAME	QUILLMAN, JACK	
STREET ADDRESS	1900S BARNWAY	
CITY- ST- ZIP	TALLAHASSEE FL 32317	
TITLE	P	☐ Delete
NAME	PEKURAY, ROBERT	
STREET ADDRESS	4060 W BUGLEVIEW	
CITY- ST- ZIP	TALLAHASSEE FL 32317	
TITLE	D	☒ Delete
NAME	GRANGER, RUSSELL	
STREET ADDRESS	1909 S BARNWAY	
CITY- ST- ZIP	TALLAHASSEE FL 32317	
TITLE	A	☐ Delete
NAME	ASHLINE, SABINE <i>Sherie</i>	
STREET ADDRESS	4013 BOTHWELL TERR	
CITY- ST- ZIP	TALLAHASSEE FL 32317	
TITLE	<i>Marcus Mauldin</i>	☐ Delete
NAME	<i>U.P.</i>	
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<i>Pat Stanley</i>	☒ Change ☐ Addition
NAME	<i>President</i>	
STREET ADDRESS	<i>4234 Benchmark Trace</i>	
CITY- ST- ZIP	<i>Tall, FL 32317</i>	
TITLE	<i>Secretary / Treasurer</i>	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	<i>at large</i>	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	<i>at large</i>	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	<i>Vice President</i>	☒ Change ☐ Addition
NAME	<i>1915 S. Barnway Street</i>	
STREET ADDRESS	<i>Tall, FL 32317</i>	
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bernadine Howell Marcus Mauldin* *1/28/08 6564085*