2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768743

FILED Apr 29, 2010 Secretary of State

Entity Name: TUPELO RIDGE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

24 IRON WOOD CT 21 BLACK GUM CT

CRAWFORDVILLE, FL 32327 US CRAWFORDVILLE, FL 32327 US

Current Mailing Address: New Mailing Address:

PO BOX 1053

CRAWFORDVILLE, FL 32327 US

FEI Number: 59-2908557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEPP, GORDON E 21 BLACK GUM CT

CRAWFORDVILLE, FL 32327 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name: CAPPS, DANNY

Address: 122 TUPELO DR.

City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: PD

Name: CUMMINGS, JOHN Address: 75 TUPELO DR.

City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: DT

Name: LEPP, GORDON E Address: 21 BLACK GUM CT.

City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: SEC

Name: LOVEL, BRIE B Address: 72 TUPELO DR.

City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: BD

Name: BRUNER, JENNIFER T Address: 24 BLACK GUM CT.

City-St-Zip: CRAWFORDVILLE, FL 32327 FL

Title: BD

Name: LICITRA, JULIA S Address: 27 IRONWOOD CT

City-St-Zip: CRAWFORDVILLE, FL 32327

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: GORDON LEPP DT 04/29/2010