2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# 768743

Entity Name: TUPELO RIDGE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

21 BLACK GUM CT
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1053
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

LEPP, GORDON E
21 BLACK GUM CT
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

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:

Title: VP
Name: ANDERSON, CHRIS
Address: 214 TUPELO DR.
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: PD
Name: HAND, TERRELL
Address: 203 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: HAND, DANA B
Address: 203 TUPELO DR.
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: BD
Name: WALTON, ROGER
Address: 24 IRON WOOD CT.
City-St-Zip: CRAWFORDVILLE, FL 32327 FL

Title: BD
Name: MCKENZIE, GEORGE
Address: 25 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 04/29/2011

Electronic Signature of Signing Officer or Director Date