

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001940

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Entity Name:** DEVONSHIRE HOMEOWNERS ASSOCIATION OF OCALA, INC.

**Current Principal Place of Business:**

2719 SE 30TH STREET  
OCALA, FL 34471

**New Principal Place of Business:**

101 NORTHEAST 16TH AVENUE  
OCALA, FL 34470

**Current Mailing Address:**

2719 SE 30TH STREET  
OCALA, FL 34471

**New Mailing Address:**

101 NORTHEAST 16TH AVENUE  
OCALA, FL 34470

**FEI Number:** 54-2092615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DINKINS, BRAD  
2719 SE 30TH STREET  
OCALA, FL 34471 US

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

DINKINS, BRAD  
101 NORTHEAST 16TH AVENUE  
OCALA, FL 34470 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: \_\_\_\_\_

02/22/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SVD  
Name: DINKINS, BRAD  
Address: 101 NORTHEAST 16TH AVENUE  
City-St-Zip: OCALA, FL 34470

Title: D  
Name: DINKINS, WENDY  
Address: 801 SE 52ND STREET  
City-St-Zip: OCALA, FL 34480

Title: D  
Name: DINKINS, BRADFORD K  
Address: 101 NE 16TH AVENUE  
City-St-Zip: OCALA, FL 34470

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: BRAD DINKINS

SVD

02/22/2010

Electronic Signature of Signing Officer or Director

Date