2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2012
Secretary of State

DOCUMENT# N01203

Entity Name: STARTING POINT FARMOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

STARTING POINT COMPLEX
MEADOWLANDS CIRCLE E. AND W.
MORRISTON, FL 32668

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 87
MORRISTON, FL 32668

New Mailing Address:

FEI Number: 59-2927768 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KING, WILLIAM A
1531 S.E. 36TH AVE.
OCALA, FL 34471 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: PD
Name: CONNELLY, TERESA
Address: P.O BOX 177
City-St-Zip: MORRISTON, FL 32668

Title: VPD
Name: BARBAZON, BUCK
Address: 4951 S.E. 212TH COURT
City-St-Zip: MORRISTON, FL 32668

Title: STD
Name: BIAMONTE, SHARON
Address: 4630 S.E. 212TH COURT
City-St-Zip: MORRISTON, FL 32668

Title: D
Name: GONZALAS, ANN
Address: 20150 S.E. 42ND STREET
City-St-Zip: MORRISTON, FL 32668

Title: D
Name: VICKERS, ROBERT
Address: 21150 S.E. 42ND STREET
City-St-Zip: MORRISTON, FL 32668

Title: D
Name: BARBAZON, DESIREE
Address: 4951 S. E. 212TH COURT
City-St-Zip: MORRISTON, FL 32668

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: SHARON BIAMONTE STD 04/06/2012
Electronic Signature of Signing Officer or Director Date