

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000588

FILED
May 14, 2011
Secretary of State

Entity Name: THE FARM HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

21 EQUINE DRIVE
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

141 REVELL ROAD
CRAWFORDVILLE, FL 32327 US

Current Mailing Address:

PO BOX 758
CRAWFORDVILLE, FL 32326

New Mailing Address:

PO BOX 758
CRAWFORDVILLE, FL 32326 US

FEI Number: 51-0417501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVLIN, TIMOTHY J
21 EQUINE DRIVE
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

LUCKING, JERRY
141 REVELL ROAD
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: JERRY LUCKING

05/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: LUCKING, JERRY
Address: 141 REVELL ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: D
Name: BEAMER, SHAKONDA
Address: 43 EQUINE DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: D
Name: LOCKWOOD, ANGELA
Address: 6 CHESTNUT LANE
City-St-Zip: CRAWFORDVILLE, FL 32326 US

Title: D
Name: BURNS, ED
Address: 117 FARRIER LANE
City-St-Zip: CRAWFORDVILLE, FL 32327 US

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: JERRY LUCKING

PRES

05/14/2011

Electronic Signature of Signing Officer or Director

Date