

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006876

FILED
Apr 27, 2007
Secretary of State

Entity Name: ROCKWOOD HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2605 SW 33RD STREET
STE 104
OCALA, FL 34474

New Principal Place of Business:

24921 BARTRAM ROAD
ASTOR, FL 32102

Current Mailing Address:

2605 SW 33RD STREET
STE 104
OCALA, FL 34474

New Mailing Address:

P O BOX 69
ASTOR, FL 32102

FEI Number: 56-2368508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, GREGORY
2605 SW 33RD STREET STE 104
OCALA, FL 34474 US

Name and Address of New Registered Agent:

SIMMONS, GREGORY
1800 NW 58TH LANE
OCALA, FL 34475 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:

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MUNDEN, DANIEL R
Address: 2605 SW 33 ST STE 104
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: SIMMONS, JAMES G
Address: 2605 SW 33 ST STE 104
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: MOORE, TERESA E
Address: 2605 SW 33 ST STE 104
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MUNDEN, DANIEL R
Address: P O BOX 69
City-St-Zip: ASTOR, FL 32102

Title: D (X) Change () Addition
Name: SIMMONS, JAMES G
Address: 1800 NW 58TH LANE
City-St-Zip: OCALA, FL 34475

Title: D (X) Change () Addition
Name: MOORE, TERESA E
Address: P O BOX 69
City-St-Zip: ASTOR, FL 32102

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERESA E MOORE

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date