

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007677

FILED
Apr 26, 2005
Secretary of State

Entity Name: ROAD OWNERS' MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

6995 SW 68TH STREET
JASPER, FL 32052

New Principal Place of Business:

Current Mailing Address:

6995 SW 68TH STREET
JASPER, FL 32052

New Mailing Address:

FEI Number: 55-0859109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCAFF, SONNY ESQ
215 NE 2ND ST
JASPER, FL 32052 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 () Delete
Name: SPELLS, BILL
Address: 6995 SW 68TH DRIVE
City-St-Zip: JASPER, FL 32052

Title: VD () Delete
Name: STOKES, LEE
Address: 3327 SCRUB OAK LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: DT () Delete
Name: HAFER, STEVE
Address: 2133 WOOD GLEN LANE
City-St-Zip: MARIETTA, GA 30067

Title: DS () Delete
Name: FORREST, DIANNE
Address: 297 DREXEL LANE
City-St-Zip: DEBRAY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STOKES, LEE
Address: 3327 SCRUB OAK LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: VD (X) Change () Addition
Name: HERBERT, STEVE
Address: 1720 SANDY HOLLOW LOOP
City-St-Zip: MIDDLEBURG, FL 32608

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: HANSON, JOY
Address: 8521 BASS LAKE DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN A. HAFER

DT

04/26/2005

Electronic Signature of Signing Officer or Director

Date