

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007677

FILED
Apr 21, 2009
Secretary of State

Entity Name: ROAD OWNERS' MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

7220 SW 72ND LANE
JASPER, FL 32052

New Principal Place of Business:

Current Mailing Address:

7220 SW 72ND LANE
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:

SPEARS, JAMES W RA
7220 SW 72ND LANE
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: HANSON, JOY L
Address: 8521 BASS LAKE DR.
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VD () Delete
Name: SPEARS, JAMES W
Address: 7220 SW 72ND LANE
City-St-Zip: JASPER, FL 32052

Title: TD () Delete
Name: SMITH, JUDI A
Address: 8594 122ND ST
City-St-Zip: LIVE OAK, FL 32060

Title: DR () Delete
Name: MORSE, PATTI
Address: 6771 SW 68TH DR
City-St-Zip: JASPER, FL 32052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: SMITH, JUDI A
Address: 7281 S.W. 68TH DRIVE
City-St-Zip: JASPER, FL 32052

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

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: JUDI SMITH

TREA

04/21/2009

Electronic Signature of Signing Officer or Director

Date