2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# N04000001490

Entity Name: COUNTRY HILLS NORTH/SOUTH, INC.

Current Principal Place of Business:

315 SOUTH CALHOUN STREET
SUITE 600
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

315 SOUTH CALHOUN STREET
SUITE 600
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 55-0885709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ERVIN, JR., JAMES M
315 SOUTH CALHOUN STREET
SUITE 600
TALLAHASSEE, FL 32301 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:	ERVIN, JR., JAMES M	
Address:	315 SOUTH CALHOUN STREET, SUITE 600	
City-St-Zip:	TALLAHASSEE, FL 32301	
Title:	SD	( ) Delete
Name:	SPARKMAN, PAULA	
Address:	540 COUNTRY HILL ROAD	
City-St-Zip:	MONTICELLO, FL 32344	
Title:	T	( ) Delete
Name:	KINSEY, W. B	
Address:	1902 RHONDA ROAD	
City-St-Zip:	TALLAHASSEE, FL 32303	
Title:	D	( ) Delete
Name:	VIED, MICHAEL	
Address:	515 COUNTRY HILL ROAD	
City-St-Zip:	MONTICELLO, FL 32344	
Title:	D	( ) Delete
Name:	DUGGER, GERALD	
Address:	1946 REGISTER ROAD	
City-St-Zip:	TALLAHASSEE, FL 32305	
Title:	D	( ) Delete
Name:	RAKER, OVERTON	
Address:	10969 GAMBLE ROAD	
City-St-Zip:	MONTICELLO, FL 32344	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	RAKER, SILAS	
Address:	672 COUNTRY HILLS ROAD	
City-St-Zip:	MONTICELLO, FL 32344	

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: JAMES M. ERVIN, JR. P/D 03/30/2009

Electronic Signature of Signing Officer or Director — Date