

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008609

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** THE OSPREY BEAUTIFICATION ASSOCIATION CORP.

**Current Principal Place of Business:**

2147 S TAMiami TRAIL  
OSPREY, FL 34229

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 810  
OSPREY, FL 342290810

**New Mailing Address:**

**FEI Number:** 65-0754825

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KOEHLER, CAROL  
119 WOODLAND PLACE  
OSPREY, FL 342292483 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  
Name: KEITH, SANDRA  
Address: 320 BAY VISTA AVE  
City-St-Zip: OSPREY, FL 34229

Title: D  
Name: KOEHLER, CAROL  
Address: 119 WOODLAND PLACE  
City-St-Zip: OSPREY, FL 34229

Title: D  
Name: DAUENHEIMER, JOHN L  
Address: 873 S TAMiami TRAIL  
City-St-Zip: OSPREY, FL 34229

Title: DS  
Name: HOUSTON, DANIEL  
Address: 163 S TAMiami TRAIL  
City-St-Zip: OSPREY, FL 34229

Title: DT  
Name: SNYDER, JACK C  
Address: 2147 S. TAMiami TRAIL  
City-St-Zip: OSPREY, FL 34229

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: C JACK SNYDER

TRES

01/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date