

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003008

FILED  
Apr 23, 2007  
Secretary of State

**Entity Name:** CLUBSIDE VILLAGE AT GOLDEN OCALA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8300 NW 31ST LANE RD.  
OCALA, FL 34482

**New Principal Place of Business:**

2605 SW 33RD STREET  
SUITE 200  
OCALA, FL 34474 US

**Current Mailing Address:**

8300 NW 31ST LANE RD.  
OCALA, FL 34482

**New Mailing Address:**

P.O. BOX 2495  
OCALA, FL 34478 US

**FEI Number:** 20-8650549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

KIRKPATRICK, KENNETH  
2605 SW 33RD STREET  
#200  
OCALA, FL 34474 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: KENNETH KIRKPATRICK

04/23/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: ROBERTS, RALPH L SR.  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177 US

Title: VP/D ( ) Delete  
Name: DONNELLY, JOE  
Address: 7340 N.W. HWY. 27  
City-St-Zip: OCALA, FL 34482 US

Title: S/D ( ) Delete  
Name: DELUCA, DONALD R  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177 US

Title: T/D ( ) Delete  
Name: GARTNER, KEVIN  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177

**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:

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: JOSEPH B. DONNELLY

VP/D

04/23/2007

Electronic Signature of Signing Officer or Director

Date