

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003739

FILED  
Jan 25, 2011  
Secretary of State

**Entity Name:** MAGNOLIAS AT OCALA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2123 SW 20TH PLACE  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

2123 SW 20TH PLACE  
OCALA, FL 34471

**New Mailing Address:**

**FEI Number:** 20-2671837

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOSSHARDT PROPERTY MANAGEMENT, LLC  
2123 SW 20TH PLACE  
OCALA, FL 34471 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: P  
Name: CAMPBELL, ROBERT  
Address: 4542 SE 31ST PLACE  
City-St-Zip: OCALA, FL 34480

Title: D  
Name: BENGE, TONY M JR.  
Address: 1507 E. CONCORD STREET  
City-St-Zip: ORLANDO, FL 32803

Title: VP  
Name: GORDON, YVONNE  
Address: 3024 SE 47TH TERRACE  
City-St-Zip: OCALA, FL 34480

Title: S/T  
Name: JOYCE, LAUREN  
Address: 4715 SE 32 STREET  
City-St-Zip: OCALA, FL 34480

Title: D  
Name: BENNETT, JIM  
Address: 3417 SE 49 AVENUE  
City-St-Zip: OCALA, FL 34480

Title: D  
Name: FABIAN, JEF  
Address: 2931 SE 49 AVENUE  
City-St-Zip: OCALA, FL 34480

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: WENDY THROWER

CMCA

01/25/2011

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

\_\_\_\_\_  
Date