

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 11, 2007 8:00 am**  
**Secretary of State**

07-11-2007 90077 026 \*\*\*\*61.25

<b>DOCUMENT # N05000004649</b> 1. Entity Name <b>BULLOCK'S RUN HOMEOWNER'S ASSOCIATION, INC.</b>					
Principal Place of Business <b>2101 BULLOCK'S RUN RD. TALLAHASSEE, FL 32303</b>			Mailing Address <b>2101 BULLOCK'S RUN RD. TALLAHASSEE, FL 32303</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <div style="font-size: 1.2em; font-family: monospace;">20-3069998</div>	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>FRASER, CHARLOTTE M 2101 BULLOCK'S RUN RD. TALLAHASSEE, FL 32303</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
				<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P HUNTER, KYLE <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	2120 BULLOCK'S RUN RD.		NAME		
STREET ADDRESS	TALLAHASSEE, FL		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	V BULA, JOSH <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	2104 BULLOCK'S RUN RD.		NAME		
STREET ADDRESS	TALLAHASSEE, FL		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	ST FRASER, CHARLOTTE <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	2101 BULLOCK'S RUN RD.		NAME		
STREET ADDRESS	TALLAHASSEE, FL		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Charlotte Fraser</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="font-size: 1.2em; font-family: monospace;">7/5/07</div> <small>Date</small>		<div style="font-size: 1.2em; font-family: monospace;">410-7162</div> <small>Daytime Phone #</small>

Charlotte Fraser