

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008733

FILED
Apr 07, 2008
Secretary of State

Entity Name: LINZY MILL HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2010 DELTA BLVD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2010 DELTA BLVD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAUTIER, RUSSELL D
2010 DELTA BLVD
TALLAHASSEE, FL 32303 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: DP () Delete
Name: BOLTON, W. NEAL
Address: P.O. BOX 93391
City-St-Zip: ATLANTA, GA 30377

Title: DV () Delete
Name: GRISCOM, THOMAS A
Address: 1465 NORTHSIDE DRIVE NW, SUITE 200
City-St-Zip: ATLANTA, GA 30318

Title: DST () Delete
Name: MARTIN, RICHARD S
Address: P.O. BOX 93391
City-St-Zip: ATLANTA, GA 30377

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:

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: RICHARD S MARTIN

DST

04/07/2008

Electronic Signature of Signing Officer or Director

Date