

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010399

FILED
Jul 29, 2008
Secretary of State

Entity Name: NORTH PORT OFF ROAD ASSOCIATION INC.

Current Principal Place of Business:

7397 MANTHEY AVE
NORTH PORT, FL 34286

New Principal Place of Business:

4172 NELE STREET
NORTH PORT, FL 34287

Current Mailing Address:

7397 MANTHEY AVE
NORTH PORT, FL 34286

New Mailing Address:

4172 NELE STREET
NORTH PORT, FL 34287

FEI Number: 65-1295134 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VAUGHAN, KEVIN J
7397 MANTHEY AVE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

BRYANT, GREGORY S
4172 NELE STREET
NORTH PORT, FL 34287 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: GREGORY S. BRYANT

07/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: VAUGHAN, KEVIN J
Address: 7397 MANTHEY AVE
City-St-Zip: NORTH PORT, FL 34286

Title: VP () Delete
Name: SHULTZ, LARRY
Address: 3049 OKLAHOMA ST
City-St-Zip: NORTH PORT, FL 34286

Title: SEC () Delete
Name: BRYANT, SCOTT
Address: 4172 NELE ST
City-St-Zip: NORTH PORT, FL 34287

Title: TRES () Delete
Name: GUINN, JULIE
Address: 6565 HARMONY RD.
City-St-Zip: NORTH PORT, FL 34287

Title: D () Delete
Name: FARRAND, JOHN
Address: 3817 FONTAINBLEU
City-St-Zip: NORTH PORT, FL 34287

Title: D () Delete
Name: DELAY, MIKE
Address: 3715 ACORN ST
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BRYANT, GREGORY S
Address: 4172 NELE STREET
City-St-Zip: NORTH PORT, FL 34287

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: CARUSONE, VANESSA
Address: 8557 RAOVL AVE
City-St-Zip: NORTH PORT, FL 34286

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ROBBINS, JIM
Address: 1005 CHARLOTTE AVE
City-St-Zip: SARASOTA, FL 34237

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: GREGORY S. BRYANT

PRES

07/29/2008

Electronic Signature of Signing Officer or Director

Date