

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005994

FILED
Apr 20, 2011
Secretary of State

Entity Name: OLD MILL COVE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6410 WHISPERING OAKS DR.
JACKSONVILLE, FL 322771585

New Principal Place of Business:

Current Mailing Address:

6410 WHISPERING OAKS DR.
JACKSONVILLE, FL 322771585

New Mailing Address:

FEI Number: 59-1913517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETOSKEY, GERALD G
6410 WHISPERING OAKS DR.
JACKSONVILLE, FL 322771585 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: PD
Name: PETOSKEY, GERALD G MR.
Address: 6410 WHISPERING OAKS DR.
City-St-Zip: JACKSONVILLE, FL 322771585

Title: VD
Name: BROWN, MELODY
Address: 4134 WHISPERING OAKS DR. E
City-St-Zip: JACKSONVILLE, FL 32277

Title: TD
Name: WOLF, JACK MR.
Address: 4162 WHISPERING OAKS DR. E
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD
Name: SCIALLI, CAROL MRS.
Address: 6270 WHISPERING OAKS DR. N
City-St-Zip: JACKSONVILLE, FL 32277

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: GERALD G. PETOSKEY

PD

04/20/2011

Electronic Signature of Signing Officer or Director

Date