

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000010512

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** NORTH MARION COMMUNITY DEVELOPMENT ASSOCIATION INC

**Current Principal Place of Business:**

4251 NW 155TH STREET  
REDDICK, FL 32686 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 402  
REDDICK, FL 32686 US

**New Mailing Address:**

**FEI Number:** 12-1245918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHISHOLM, FRED  
692 NW 30TH AVE.  
OCALA, FL 34475 US

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

BANKS, JOHN  
617 MW 192 AVE  
GAINESVILLE, FL 32609 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: JOHN BANKS

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PRESTON, GERALD  
Address: P.O BOX 42  
City-St-Zip: REDDICK, FL 32686 US

Title: VP  
Name: BOWERS, JOHNNY  
Address: 15645 NW 144TH RD  
City-St-Zip: REDDICK, FL 32686 US

Title: SEC  
Name: HINES, JACQUELYN  
Address: 15110 NW 29TH TERR.  
City-St-Zip: REDDICK,, FL 32686 US

Title: DIR  
Name: ADKINS, GERALDINE  
Address: 15650 NW 44 AVE RD  
City-St-Zip: REDDICK, FL 32686 US

Title: DIR  
Name: THOMAS, ANNA F  
Address: 9953 NW HWY 318  
City-St-Zip: REDDICK, FL 32686 US

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: JACQUELYN HINES

SEC.

04/29/2011

Electronic Signature of Signing Officer or Director

Date