

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010772

FILED
Feb 23, 2011
Secretary of State

Entity Name: TRI-COUNTY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

28444 FORBES ST
NOBLETON, FL 34601 HE

New Principal Place of Business:

28444 FORBES ST
BROOKSVILLE, FL 34601 HE

Current Mailing Address:

P.O. BOX 115
NOBLETON,, FL 34661 HE

New Mailing Address:

FEI Number: 27-4075865 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEWIS, DORIS I
29060 THACKERAY ST
NOBLETON, FL 34601 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: P
Name: LEWIS, DORIS I
Address: 29060 THACKERAY ST
City-St-Zip: NOBLETON, FL 34601 HE

Title: VP
Name: BRINK, JOHN
Address: 8510 CR 6647-S
City-St-Zip: BUSHNELL, FL 33513 SU

Title: SEC
Name: KAVANAUGH, ANN
Address: 29030 SENTINEL ST
City-St-Zip: NOBLETON, FL 34601 HE

Title: TREA
Name: BARNES, HORTON
Address: 8480 CR 647-S
City-St-Zip: BUSHNELL, FL 33513 SU

Title: DIR
Name: GRIFFITH, DAVID
Address: 29037 THACKERAY ST
City-St-Zip: BROOKSVILLE, FL 34601 HE

Title: DIR
Name: EDELASHMIT, ELAINE
Address: 8531 COUNTY ROAD 638
City-St-Zip: BUSHNELL, FL 33513

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: DORIS I. LEWIS

PRES

02/23/2011

Electronic Signature of Signing Officer or Director

Date