

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11022

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** SHADY HISTORIC AND SCENIC TRAILS ASSOCIATION, INC.

**Current Principal Place of Business:**

655 SW 80TH ST  
OCALA, FL 34476 US

**New Principal Place of Business:**

**Current Mailing Address:**

655 SW 80TH ST  
OCALA, FL 34476 US

**New Mailing Address:**

**FEI Number:** 89-2598776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WEESNER, DARLENE  
655 SW 80TH ST.  
OCALA, FL 34476 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: LEGGETT, RICHARD  
Address: 8001 S E 7 AVENUE ROAD  
City-St-Zip: OCALA, FL 34480

Title: AS  
Name: WEESNER, DARLENE  
Address: 655 SW 80 STREET  
City-St-Zip: OCALA, FL 34476

Title: VP  
Name: KEITH, DAVID  
Address: 3140 S W 86 PLACE  
City-St-Zip: OCALA, FL 34476

Title: SD  
Name: SYKES, JUDY  
Address: 211 S W 80 STREET  
City-St-Zip: OCALA, FL 34476

Title: TD  
Name: BAKER, DON  
Address: 300 S.W. 80 STREET  
City-St-Zip: OCALA, FL 34476

Title: D  
Name: OEST, GLORIA  
Address: 7850 S MAGNOLIA AVENUE  
City-St-Zip: OCALA, FL 34476

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: JUDY SYKES

SD

04/25/2012

Electronic Signature of Signing Officer or Director

Date