

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11703

FILED
May 14, 2009
Secretary of State

Entity Name: RUSTIC OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1040 RUSTIC LN
LAKELAND, FL 33811 US

New Principal Place of Business:

Current Mailing Address:

1040 RUSTIC LN
LAKELAND, FL 33811 US

New Mailing Address:

FEI Number: 59-2580296 **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:

DUBOIS, HOLLY L
1040 RUSTIC LN
LAKELAND, FL 33811 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 () Delete
Name: JEFFERS, EUGENE
Address: 1111 RUSTIC LN
City-St-Zip: LAKELAND, FL 33811

Title: VD () Delete
Name: PEACE, W. LAMAR
Address: 1011 RUSTIC LN
City-St-Zip: LAKELAND, FL 33811

Title: SD () Delete
Name: MCDONALD, JAN
Address: 1121 RUSTIC LN
City-St-Zip: LAKELAND, FL 33811

Title: TD () Delete
Name: DUBOIS, HOLLY
Address: 1040 RUSTIC LN
City-St-Zip: LAKELAND, FL 33811

Title: D () Delete
Name: MCFARLAND, JAMES R
Address: 1071 RUSTIC LN
City-St-Zip: LAKELAND, FL 33811

Title: D () Delete
Name: ST. SAUVEUR, WAYNE
Address: 1041 RUSTIC LN
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: HOLLY L DUBOIS

TD

05/14/2009

Electronic Signature of Signing Officer or Director

Date