

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11922

FILED
Jan 05, 2012
Secretary of State

Entity Name: BOBBIN BROOK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 1713
TALLAHASSEE, FL 32302 US

New Principal Place of Business:

119 S MONROE ST
STE 202
TALLAHASSEE, FL 32301 US

Current Mailing Address:

P. O. BOX 1713
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 59-2855119 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EATON, JAMES
119 S MONROE ST
STE 202
TALLAHASSEE, FL 32301 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: DP
Name: HERNDON, JOHN T
Address: 3701 BOBBIN BROOK CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: BYE, KATHY
Address: 3956 BOBBIN BROOK CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: JOHNSON, HAL
Address: 511 BOBBIN BROOK LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: DT
Name: EATON, JAMES E
Address: 3682 BOBBIN BROOK CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: LAUER, DALE
Address: 1545 ROYMON DIEHL ROAD, SUITE 250
City-St-Zip: TALLAHASSEE, FL

Title: DS
Name: MARION CAMPS
Address: 3800 BOBBIN BROOK CIR.
City-St-Zip: TALLAHASSEE, FL

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: JAMES EATON

DT

01/05/2012

Electronic Signature of Signing Officer or Director

_____ Date