

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13247

FILED
Apr 20, 2009
Secretary of State

Entity Name: GREEN OAKS OF CHAIRES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8814 GREEN ACORN LN
TALLAHASSEE, FL 32317 US

New Principal Place of Business:

Current Mailing Address:

8814 GREEN ACORN LN
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-3011035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALSTEAD, JASON
8814 GREEN ACORN LN
TALLAHASSEE, FL 32317 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: D () Delete
Name: HALSTEAD, JASON
Address: 8814 GREEN ACORN LANE
City-St-Zip: TALLAHASSEE, FL 32317

Title: SD () Delete
Name: BLASKO, BYRON
Address: 8838 GREEN ACORN LN.
City-St-Zip: TALLAHASSEE, FL

Title: T () Delete
Name: BAIRD, JENNA
Address: 8801 GREEN OAK DRIVE
City-St-Zip: TALLAHASSEE, FL 32317

Title: C () Delete
Name: F
Address: F
City-St-Zip: TALLAHASSEE, FL

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:

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: JASON M HALSTEAD

MR

04/20/2009

Electronic Signature of Signing Officer or Director

Date