

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14306

FILED  
Mar 27, 2012  
Secretary of State

**Entity Name:** ONE PASCO CENTER OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

14651 21 ST.  
DADE CITY, FL 33523 US

**New Principal Place of Business:**

14651 21ST STREET  
DADE CITY, FL 33523 US

**Current Mailing Address:**

P.O. BOX 278  
DADE CITY, FL 335260278 US

**New Mailing Address:**

**FEI Number:** 59-2887682      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BROWN, BILLY E  
14651 21ST STREET  
DADE CITY, FL 33525 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  
Name: SMITH, THOMAS E.  
Address: P.O. BOX 278  
City-St-Zip: DADE CITY, FL 33526

Title: TD  
Name: ROBERTS, KEVIN T.  
Address: P.O. BOX 278  
City-St-Zip: DADE CITY, FL 33526

Title: D  
Name: MCCLAIN, JOE A.  
Address: P.O. BOX 278  
City-St-Zip: DADE CITY, FL 33526

Title: D  
Name: BROWN, BILLY E.  
Address: P.O. BOX 278  
City-St-Zip: DADE CITY, FL 33526

Title: D  
Name: SCHRADER, THOMAS A  
Address: P.O. BOX 278  
City-St-Zip: DADE CITY, FL 33526

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: BILLY E. BROWN

PRES

03/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date