2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2010
Secretary of State

DOCUMENT# N28433

Entity Name: MARIETTA FORREST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4213 COUNTY ROAD 218
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

4213 COUNTY ROAD 218
SUITE 1
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: 59-2960976 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AWAKENINGS ASSOCIATION MANAGEMENT, INC.
4213 COUNTY ROAD 218
MIDDLEBURG, FL 32068 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: GILMORE, BILL
Address: 4213 COUNTY ROAD 218 SUITE 1
City-St-Zip: MIDDLEBURG, FL 32068

Title: DS
Name: TABB, PATRICIA
Address: 4213 COUNTY ROAD 218 SUITE 1
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP
Name: REAVES, JOHN
Address: 4213 COUNTY ROAD 218 SUITE 1
City-St-Zip: MIDDLEBURG, FL 32068

Title: DT
Name: MULLIS, DAVID
Address: 4213 COUNTY ROAD 218 SUITE 1
City-St-Zip: MIDDLEBURG, FL 32068

Title: D
Name: MIRELES, DAVID
Address: 4213 COUNTY ROAD 218 SUITE 1
City-St-Zip: MIDDLEBURG, FL 32068

Title: D
Name: ROOF, HARVEY
Address: 4213 COUNTY ROAD 218 SUITE 1
City-St-Zip: MIDDLEBURG, FL 32068

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: BILL GILMORE PD 01/26/2010

Electronic Signature of Signing Officer or Director Date