

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38973

FILED  
Mar 17, 2012  
Secretary of State

**Entity Name:** ODIE ROAD PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13955 ODIE RD  
JACKSONVILLE, FL 32220 US

**New Principal Place of Business:**

**Current Mailing Address:**

13955 ODIE RD  
JACKSONVILLE, FL 32220 US

**New Mailing Address:**

**FEI Number:** 59-3032007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GODWIN, GERALD  
13955 ODIE RD  
JACKSONVILLE, FL 32220 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  
Name: GODWIN, GERALD  
Address: 13955 ODIE RD  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: VP  
Name: COLLEY, MICHAEL  
Address: 13925 ODIE RD  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: ST  
Name: GODWIN, DEBRA  
Address: 13955 ODIE ROAD  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: D  
Name: BAXLEY, TILLMAN  
Address: 13949  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: D  
Name: CADE, TOM  
Address: 13991 ODIE ROAD  
City-St-Zip: JACKSONVILLE, FL 32220 US

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:** DEBRA K GODWIN

SEC

03/17/2012

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

\_\_\_\_\_  
Date