## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48891

FILED Feb 19, 2011 Secretary of State

Entity Name: TOMOKA OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O 3 BAY HILL DRIVE

36 NORTH SAINT ANDREWS DR ORMOND BEACH, FL 32174 US
ORMOND BEACH, FL 32174 US

Current Mailing Address: New Mailing Address:

C/O 124 N. NOVA ROAD

36 NORTH SAINT ANDREWS DR BOX 193

ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 US

FEI Number: 59-1992568 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NIXON, JOHN H
POWER, CAROL A
36 NORTH SAINT ANDREWS DR
3 BAY HILL DRIVE

ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 US

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: CAROL A. POWER 02/19/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: PD

Name: RIVERS, RICK Address: 3 SHERWOOD DR.

City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD

Name: MARA, WENDY
Address: 13 NOTTINGHAM DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: DS

Name: BOCKOVEN, NANCY Address: 16 EAGLE COURT

City-St-Zip: ORMOND BEACH, FL 32174

Title: DT

Name: POWER, CAROL A Address: 3 BAY HILL DRIVE

City-St-Zip: ORMOND BEACH, FL 32174

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: CAROL A. POWER DT 02/19/2011