

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51212

FILED
Feb 08, 2012
Secretary of State

Entity Name: SHENANDOAH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7820 NW 20 LANE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 357026
GAINESVILLE, FL 32635 US

New Mailing Address:

FEI Number: 59-3147644 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GOFORTH, SAM
7820 NW 20TH LANE
GAINESVILLE, FL 32605 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: THIEMS-HEFLIN, SUZI
Address: 2101 NW 77 ST
City-St-Zip: GAINESVILLE, FL

Title: ST
Name: GOFORTH, SAM
Address: 7820 NW 20 LANE
City-St-Zip: GAINESVILLE, FL

Title: PRES
Name: MITCHELL, LAURIE
Address: 7832 NW 18TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: MONTRICHARD, LLEWELLYN
Address: 2121 NW 77 ST
City-St-Zip: GAINESVILLE, FL 32605

Title: VP
Name: MCINTYRE, MARY
Address: 7817 NW 77TH STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: JEFFERSON, CURTIS
Address: 2205 N.W. 77 ST
City-St-Zip: GAINESVILLE, FL 32605

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: SAM GOFORTH

ST

02/08/2012

Electronic Signature of Signing Officer or Director

_____ Date