

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001303

FILED  
Apr 07, 2012  
Secretary of State

**Entity Name:** OLD PALM VALLEY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

151 SAWGRASS CORNERS DRIVE  
SUITE 204 G  
PONTE VEDRA, FL 32082 US

**New Principal Place of Business:**

151 SAWGRASS CORNERS DRIVE  
SUITE 217  
PONTE VEDRA, FL 32082 US

**Current Mailing Address:**

P. O. BOX 2055  
PONTE VEDRA, FL 32004

**New Mailing Address:**

130 CORRIDOR RD.  
# 2055  
PONTE VEDRA, FL 32004

**FEI Number:** 59-3198314

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EWING, JOHN T  
151 SAWGRASS CORNERS DRIVE  
SUITE 204 G  
PONTE VEDRA, FL 32082 US

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

EWING, JOHN T  
130 CORRIDOR RD.  
# 2055  
PONTE VEDRA, FL 32004 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:

04/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FRIEDMAN, RITA  
Address: 252 SHELL BLUFF CT.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D  
Name: ECKERT, TRAVIS  
Address: 220 SHELL BLUFF CT  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP  
Name: PAHLOW, RYAN  
Address: 157 BEAR PEN RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P  
Name: TOBY, TYLER  
Address: 145 BEAR PEN RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: ST  
Name: WOODS, ANDY  
Address: 145 BEAR PEN RD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D  
Name: CURRY, CAROL  
Address: 101 PALM BAY CT  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: TYLER TOBY

P

04/07/2012

Electronic Signature of Signing Officer or Director

Date