

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002463

FILED  
Mar 30, 2011  
Secretary of State

**Entity Name:** MACKERY WOODS HOMEOWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

89 PAMALA PLACE  
C/O CHARLES CHAFIN  
SOPCHOPPY, FL 32358

**New Principal Place of Business:**

**Current Mailing Address:**

89 PAMALA PLACE  
C/O CHARLES CHAFIN  
SOPCHOPPY, FL 32358

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

CHAFIN, CHARLES C  
89 PAMELA PLACE  
SOPCHOPPY, FL 32358      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: ROCCO, LOUIS  
Address: 2313 OHBAH NENE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VD  
Name: PAUL ANDREWS  
Address: 55 PAMELA PLACE  
City-St-Zip: SOPCHOPPY, FL 32358

Title: SD  
Name: ANDREWS, VICKY  
Address: 55 PAMELA PL  
City-St-Zip: SOPCHOPPY, FL 32358

Title: TD  
Name: CHAFIN, PAMELA  
Address: 89 PAMELA PL  
City-St-Zip: SOPCHOPPY, FL 32358

Title: SA  
Name: JAMES, KAREN  
Address: 14 PAMELA PLACE  
City-St-Zip: SOPCHOPPY, FL 32358

Title: D  
Name: CHAFIN, CHARLES  
Address: 89 PAMELA PLACE  
City-St-Zip: SOPCHOPPY, FL 32358

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: PAMELA J. CHAFIN

TD

03/30/2011

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

\_\_\_\_\_  
Date