

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003026

FILED
Jan 30, 2012
Secretary of State

Entity Name: ODOM'S MILL COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

10036 SAWGRASS DRIVE WEST
SUITE 1
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

C/O MAY MANAGEMENT 5455 A1A SOUTH
SAINT AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 59-3321131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC
5455 A1A SOUTH
SAINT AUGUSTINE, FL 32080 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: HANSEN, CLAY
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VP
Name: PIZZI, DAVID ALAN
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T
Name: HEALY, NANCY
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P
Name: GRANT, SCOTT A
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S
Name: SHOALS, CHUCK
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: SCOTT GRANT

P

01/30/2012

Electronic Signature of Signing Officer or Director

Date