

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N97000002030

Entity Name: OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

HAYDEN & ASSOC
8359 BEACON BLVD STE 213
FORT MYERS, FL 33907 US

New Principal Place of Business:

C/O COMPASS GROUP
3701 TAMIAMI TRAIL N, 3RD FLOOR
NAPLES, FL 34103 US

Current Mailing Address:

HAYDEN & ASSOC
8359 BEACON BLVD STE 213
FORT MYERS, FL 33907 US

New Mailing Address:

C/O COMPASS GROUP
3701 TAMIAMI TRAIL N, 3RD FLOOR
NAPLES, FL 34103 US

FEI Number: 65-0785766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYDEN & ASSOC
8359 BEACON BLVD STE 213
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

COMPASS GROUP
3701 TAMIAMI TRAIL N, 3RD FLOOR
NAPLES, FL 34103 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: JEFF MITCHELL

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DINAN, TOM
Address: 7058 SUGAR MAGNOLIA CIR
City-St-Zip: NAPLES, FL 34109

Title: VP () Delete
Name: GATLIN, CLYDE
Address: 6464 AUTUMN WOODS BLVD
City-St-Zip: NAPLES, FL 34109

Title: ST () Delete
Name: NOONAN, LINDA
Address: 6551 MANGROVE WAY
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: WILLIAMS, BRUCE
Address: 7025 SUGAR MAGNOLIA CIR
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: DEPERI, CHARLIE
Address: 7062 SUGAR MAGNOLIA CIR
City-St-Zip: NAPLES, FL 34109

Title: PM (X) Delete
Name: HAYDEN, KEN
Address: 8359 BEACON BLVD STE 213
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DINAN, THOMAS
Address: 7058 SUGAR MAGNOLIA CIR
City-St-Zip: NAPLES, FL 34109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CAROZZA, ARLENE
Address: 6611 CHESTNUT CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: S (X) Change () Addition
Name: WILLIAMS, BRUCE
Address: 7025 SUGAR MAGNOLIA CIR
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: BEAUREGARD, ROBERT
Address: 6347 OLD MAHOGANY COURT
City-St-Zip: NAPLES, FL 34109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS DINAN

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date