2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCTIMENT # N97000004787

2111 GILLIAM ROAD TALLAHASSEE FL 32308

Pr



FILED Jan 22, 2007 08:00 AM **Secretary of State**

AILLIAM ROAD PROPERTY OWNERS ASSOCIATION, NC. Incipal Place of Business Mailing Address			
incipal Place of Business Mailing Address			
	incipal Place of Business	Mailing Address	

2111 GILLIAM ROAD TALLAHASSEE FL 32308

3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apl. #, etc. City & State City & State

1st MOORE CR2E037 (10/06) Applied For 4. FEI Number 59-3478020 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RUSH, ROBERT G Street Address (P.O. Bux Number is Not Acceptable) 2111 GILLIAM ROAD TALLAHASSEE FL 32308

Zıp Code City

8.	The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida.	ram lamiliar with, and accopt
	the obligations of registered agent.	
SIC	GNATURE	

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2007

Significate, typed or printed name of registered agent and life if applicable.

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

DATE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change Addition III)E Delete THILE NAME RUSH, ROBERT NAME U000000598812 STREET ADDRESS STRUELADORESS 2111 GILLIAM ROAD 01/25/07-80001-024 61.25 CHY-SI-ZIP CHY-ST-ZIP TALLAHASSEE FL 32308 Addition ☐ Change Delete HILL HHE D NAME NAME WILGUS, ROBERT STREET ADDRESS STREET ADDRESS 2111 GILLIAM ROAD CITY-ST-ZIP TALLAHASSEE FL 32308 CITY-ST-7IP Ши ☐ Change ☐ Addition Defete HILL. D NAME NAMI FERRELL, CARL STREET ADDRESS STREET ADDRESS 2104 8 GILLIAM ROAD CUTY-S1-ZIP CITY-SI-ZIP TALLAHASSEE FL 32308 ☐ Addition Change Hitt ☐ Delete NAMI NAME STREET ADDRESS STREET ADDRESS CITY+S1-7IP CITY-ST-ZIP ☐ Change ☐ Addition Delete HILE NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-7IP Change ☐ Addition Delete DHE TIME NAME NAME STREET ADDRESS STRELT ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

ROBERT G. Ruis

DIRECTIA

1-14-07