


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-21-2007 90021 046 ****61.25

DOCUMENT # N98000004348					
1. Entity Name SOUTH DUNNELLON CIVIC ASSOCIATION, INC.					
Principal Place of Business 1962 W TEST COURT DUNNELLON, FL 34434			Mailing Address P.O. BOX 3341 DUNNELLON, FL 34430		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3529534	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CAMPBELL, RANDOLPH 1554 W NAT TURNER LANE DUNNELLON, FL 34434				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Randolph Campbell</i> Signature, typed or printed name of registered agent and title if applicable.				DATE <i>2/19/07</i> DATE	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOETIUS, ANDRE 12530 N WATER WAY PO BOX 2481 DUNNELLON, FL 34430	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SR. Futch, Johnny 1688 W. Nat Turner Ln, P.O. Box 346 Dunnellon, FL 34430	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M CAMPBELL, RANDOLPH 1540 W. NAT TURNER LN. DUNNELLON, FL 34434	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANN Wise 1559 W Dupage Trail Dunnellon, Fla 34434	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CHESTEEN, LARRY 12452 N. LEFANT TERR., PO BOX 353 DUNNELLON, FL 34430	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cecil Wise 1559 W. Dupage Trail Dunnellon, FL 34434	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTGOMERY, ROCHELLE L 12409 N HANDY TERR DUNNELLON, FL 34433	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Clinton Chesteen 1652 Henry Blair Lane P.O. Box 1354 Dunnellon, FL 34430	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COLLINS, WILLIE SR. 1950 TUBMAN LN - P O BOX 982 DUNNELLON, FL 34430	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, MARIE 12440 N. HANDY TERR DUNNELLON, FL 34433	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Randolph Campbell (M)</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE <i>2/19/07</i> 352-465-7135 Date Daytime Phone #	

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