

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767486

FILED
Jan 18, 2010
Secretary of State

Entity Name: LITHIA OAKS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3007 WISTER CIRCLE
VALRICO, FL 33594

New Principal Place of Business:

3007 WISTER CIRCLE
VALRICO, FL 33596

Current Mailing Address:

3007 WISTER CIRCLE
VALRICO, FL 33594

New Mailing Address:

3007 WISTER CIRCLE
VALRICO, FL 33596

FEI Number: 59-2951165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, CAROL
3007 WISTER CIRCLE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

ROBINSON, CAROL
3007 WISTER CIRCLE
VALRICO, FL 33596 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:

01/18/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: AYRES, JAY
Address: 3058 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: S
Name: MADISON, TAMMY
Address: 3054 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: D
Name: GOODALE, DIANE
Address: 3006 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: D
Name: DIXON, WILLIAM
Address: 2104 DOEFIELD COURT
City-St-Zip: VALRICO, FL 33594

Title: T
Name: HOLCOMBE, MARIE
Address: 3005 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: D
Name: BARNEY, MICHAEL
Address: 3060 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33596

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: J MARIE HOLCOMBE

TRES

01/18/2010

Electronic Signature of Signing Officer or Director

Date