

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767486

FILED
Mar 05, 2012
Secretary of State

Entity Name: LITHIA OAKS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3007 WISTER CIRCLE
VALRICO, FL 33596

New Principal Place of Business:

Current Mailing Address:

3007 WISTER CIRCLE
VALRICO, FL 33596

New Mailing Address:

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 33596 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: VP
Name: ROBISON, ROBBIE
Address: 3007 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33596

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

Title: P
Name: BROWN, FRED
Address: 3015 WILTON LANE
City-St-Zip: VALRICO, FL 33596

Title: D
Name: DIXON, WILLIAM
Address: 2104 DOEFIELD COURT
City-St-Zip: VALRICO, FL 33596

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

TREA

03/05/2012

Electronic Signature of Signing Officer or Director

Date