

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757827

**FILED**  
**Apr 08, 2014**  
**Secretary of State**  
**CC5115083571**

**Entity Name:** OJC HOME OWNERS ASSOCIATION NO. 1, INC.

**Current Principal Place of Business:**

2123 SW 20TH PLACE  
OCALA, FL 34471

**Current Mailing Address:**

2123 SW 20TH PLACE  
OCALA, FL 34471 US

**FEI Number:** 59-2212945

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BOSSHARDT PROPERTY MANAGEMENT, LLC  
2123 SW 20TH PLACE  
OCALA, FL 34471 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                    |                 |                    |
|-----------------|--------------------|-----------------|--------------------|
| Title           | PD                 | Title           | VP                 |
| Name            | BILL, DEAS P       | Name            | NYGAARD, ERIK      |
| Address         | 2123 SW 20TH PLACE | Address         | 2123 SW 20TH PLACE |
| City-State-Zip: | OCALA FL 34471     | City-State-Zip: | OCALA FL 34471     |
|                 |                    |                 |                    |
| Title           | SEC/TREASURER      |                 |                    |
| Name            | HOGAN, BARBARA     |                 |                    |
| Address         | 2123 SW 20TH PLACE |                 |                    |
| City-State-Zip: | OCALA FL 34471     |                 |                    |

*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:** BILL P DEAS

**PRESIDENT**

**04/08/2014**

Electronic Signature of Signing Officer/Director Detail

Date