

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 767486

**Entity Name:** LITHIA OAKS PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3007 WISTER CIRCLE  
VALRICO, FL 33596**Current Mailing Address:**3007 WISTER CIRCLE  
VALRICO, FL 33596**FEI Number:** 59-2951165**Certificate of Status Desired:** No**Name and Address of Current 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

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

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

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

Title	D
Name	AYERS, JAY
Address	3058 WISTER CIR
City-State-Zip:	VALRICO FL 33596

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

Title	D
Name	BARNEY, MICHAEL
Address	3060 WISTER CIRCLE
City-State-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****TREASURER****02/12/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date