

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000002291

**FILED**  
**Mar 11, 2016**  
**Secretary of State**  
**CC3046593681**

**Entity Name:** ANDERSEN CAMPUS PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4410 SE 3RD AVENUE  
OCALA, FL 34480

**Current Mailing Address:**

4410 SE 3RD AVENUE  
OCALA, FL 34480

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

TOWRY, JAMES B DR.  
4410 SE 3RD AVENUE  
OCALA, FL 34480 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: JAMES B. TOWRY

03/11/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name TOWRY, JAMES B DR.  
Address 100 SE 123RD STREET ROAD  
City-State-Zip: Ocala FL 34480

Title D  
Name MCKEE-ALEXANDER, BETHANY J DR.  
Address 4410 SE 3RD AVENUE  
City-State-Zip: Ocala FL 34480

Title DST  
Name CROSS, ROBERT S ESQ.  
Address 6696 SW 17TH TERRACE RIAD  
City-State-Zip: Ocala FL 34476

*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: DR. BETHANY MCKEE-ALEXANDER

D

03/11/2016

Electronic Signature of Signing Officer/Director Detail

Date