

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004158

Entity Name: GOLDENROD COMMUNITY ALLIANCE, INC.

Current Principal Place of Business:

5100 OLD HOWELL BRANCH ROAD
WINTER PARK, FL 32792

Current Mailing Address:

P. O. BOX 333
GOLDENROD, FL 32733

FEI Number: 59-3587502

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOX, DODI CPA
5100 OLD HOWELL BRANCH ROAD
WINTER PARK, FL 32792 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
Name BAILEY, MARK
Address 5100 OLD HOWELL BRANCH ROAD
City-State-Zip: WINTER PARK FL 32792

Title VD
Name TAYLOR, BOB
Address 5100 OLD HOWELL BRANCH ROAD
City-State-Zip: WINTER PARK FL 32792

Title TD
Name FOX, DODI CPA
Address 5100 OLD HOWELL BRANCH ROAD
City-State-Zip: WINTER PARK FL 32792

Title SD
Name HINKLEY, CINDY
Address 5100 OLD HOWELL BRANCH ROAD
City-State-Zip: WINTER PARK FL 32792

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: CINDY HINKLEY

SECT

01/15/2014

Electronic Signature of Signing Officer/Director Detail

Date