

**2015 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:** DODI FOX

TD

04/24/2015

Electronic Signature of Signing Officer/Director Detail

Date