

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006333

FILED
Apr 27, 2009
Secretary of State

Entity Name: MABRY OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2921 ROBERTS AVE.
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

2921 ROBERTS AVE.
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-2252756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH THOMPSON SHAW MANAUSA P.A.
3520 THOMASVILLE RD.
400
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BASS, EDWARD N
Address: 805 N. GADSEN
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP () Delete
Name: SWEENEY, WILLIAM
Address: 3114 ORTEGA DR.
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: TRES () Delete
Name: INZER, BOB
Address: 613 FOREST LAKE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: SEC () Delete
Name: RICE, PATI
Address: 60HICKAT TRAIL C
City-St-Zip: WAKULLA, FL 32327 US

Title: ED () Delete
Name: TURKLE, TYLER
Address: 1511 MARION AVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JOHNSON, IVAN
Address: 930 THOMASVILLE ROAD, SUITE 100
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP (X) Change () Addition
Name: VARN, CRAIG
Address: 101N. MONROE ST., SUITE 1090
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: TRES (X) Change () Addition
Name: MEDINA, JOHN
Address: P.O. BOX 680
City-St-Zip: MIDWAY, FL 32343 US

Title: SEC (X) Change () Addition
Name: CHUMBLER, MARTHA
Address: 215 S. MONROE ST., SUITE 500
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TYLER TURKLE

EXEC

04/27/2009

Electronic Signature of Signing Officer or Director

Date