

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02355

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** OAKCREEK CAVERNS LOT OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4009 SW 20TH AVE.  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

4000 SW 20TH AVE.  
OCALA, FL 34471 US

**New Mailing Address:**

FEI Number: 59-2594131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALLAWAY, III, LAWRENCE C.  
333 NW 3RD AVENUE  
OCALA, FL 34475 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: D  
Name: JACKSON, ROY  
Address: 4455 SW 20TH AVE  
City-St-Zip: Ocala, FL 34471 US

Title: D  
Name: KOCH, STEVE  
Address: 4120 SW 20 AVE  
City-St-Zip: Ocala, FL 34471 US

Title: D  
Name: CASSE, JOHN  
Address: 4405 SW 20TH AVE  
City-St-Zip: Ocala, FL 34471 US

Title: D  
Name: OIVEROS, ROSEMARIE  
Address: 4200 SW 20TH AVE  
City-St-Zip: Ocala, FL 34471

Title: D  
Name: ROBERTS, BEN  
Address: 4460 SW 20TH AVE.  
City-St-Zip: Ocala, FL 34471 US

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: ROSEMARIE OLIVEROS

D

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date