

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23073

FILED
Jun 23, 2008
Secretary of State

Entity Name: ICHETUCKNEE FOREST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1217 SW LONCALA LP
FORT WHITE, FL 32038

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 487
FORT WHITE, FL 32038

New Mailing Address:

FEI Number: 59-2907455 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SMITH, TERRE S
1217 SW LONCALA LP
FORT WHITE, FL 32038 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

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: JOHNSON, NORMAN
Address: RT. 1, BOX 1646
City-St-Zip: O'BRIEN, FL 32071

Title: SD () Delete
Name: SMITH, TERRI
Address: RT 1 BOX 1624
City-St-Zip: O'BRIEN, FL 32071

Title: T () Delete
Name: JUNE, GAYLE
Address: 948 SW LONCALA LP
City-St-Zip: FORT WHITE, FL 32038

Title: P () Delete
Name: JANSEN, THOMAS
Address: 1401 SW LONCALA LP
City-St-Zip: FORT WHITE, FL 32038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: ROBERTS, CHARLES
Address: 1539 S.W. LONCALA LOOP
City-St-Zip: FORT WHITE FL., FL 32038

Title: SD (X) Change () Addition
Name: DOMINGUEZ, ELIZABETH
Address: 1401 S.W. LONCALA LOOP
City-St-Zip: FORT WHITE, FL 32038

Title: T (X) Change () Addition
Name: TERRE, SMITH
Address: 1217 S.W. LONCALA LOOP
City-St-Zip: FORT WHITE, FL 32038

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: TERRE S. SMITH

T

06/23/2008

Electronic Signature of Signing Officer or Director

Date