2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736521

FILED Jan 30, 2012 Secretary of State

Entity Name: JAMESTOWN VILLAGE - UNIT ONE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434, SUITE 5000 2180 WEST SR 434 LONGWOOD, FL 32779 SUITE 5000

LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

2180 WEST SR 434, SUITE 5000 2180 WEST SR 434

LONGWOOD, FL 32779 SUITE 5000

LONGWOOD, FL 32779

FEI Number: 59-1698478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PRESIDENTIAL GROUP SOUTH
HART, JAMES W JR
SENTRY MANAGEMENT INC

ALTAMONTE SPRINGS, FL 32714 US 2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 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: JAMES W HART JR 01/30/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 HOLCOMB, MARGARET

 Address:
 2180 WEST SR 434 STE 5000

 City-St-Zip:
 LONGWOOD, FL 32779

Title: VPD

 Name:
 ANDERSON, MARYANNE

 Address:
 2180 WEST SR 434 STE 5000

 City-St-Zip:
 LONGWOOD, FL 32779

Title: SD

Name: LOWERY, KATHY

Address: 2180 WEST SR 434 STE 5000 City-St-Zip: LONGWOOD, FL 32779

Title: TD

Name: KLINCK, SUSAN

Address: 2180 WEST SR 434 STE 5000 City-St-Zip: LONGWOOD, FL 32779

City-St-Zip. LONG \$ \$ \$ \$ \$ 27.79

Title:

Name: OBRIEN, DIANE

Address: 2180 WEST SR 434 STE 5000 City-St-Zip: LONGWOOD, FL 32779

Title:

Name: WOOD, LAURA

Address: 2180 WEST SR 434 STE 5000 City-St-Zip: LONGWOOD, FL 32779

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: MARGARET HOLCOMB PD 01/30/2012

2012 ANNUAL CORPORATE REPORT

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OFFICERS AND DIRECTORS, CONTINUED

DIRECTOR

MARILYN DAVIS

2180 WEST SR 434 STE 5000

LONGWOOD, FL 32779