

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738833

FILED
Mar 06, 2012
Secretary of State

Entity Name: LINKSIDE AT BAYMEADOWS, INC.

Current Principal Place of Business:

LINKSIDE AT BAY BAYMEADOWS
7835 LINKSIDE DRIVE
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

LINKSIDE AT BAY BAYMEADOWS
7835 LINKSIDE DRIVE
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-1862868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, RICK
7835 LINKSIDE DRIVE
JACKSONVILLE, FL 32256 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: PD
Name: BUTLER, RICK
Address: 7835 LINKSIDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPD
Name: DOYLE, JOYCE
Address: 7826 LINKSIDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD
Name: HERBERT, JOHN W JR
Address: 7829 BAYMEADOWS CR W.
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD
Name: GLINSKI, MICHAEL
Address: 9245 WINGED FOOT LANE
City-St-Zip: JACKSONVILLE, F 3

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: RICK BUTLER

PRES

03/06/2012

Electronic Signature of Signing Officer or Director

Date