2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#739250

FILED Feb 09, 2009 Secretary of State

Entity Name: AMELIA WOODS BEACH AND RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.

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

2700 MIZELL ST

FERNANDINA BCH, FL 32034

Current Mailing Address: New Mailing Address:

2700 MIZELL ST 2700 MIZELL ST - OFFICE FERNANDINA BCH, FL 32034 FERNANDINA BCH, FL 32034

FEI Number: 59-1927137 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:

LOPER, ALVIN K 2700 MIZELL STREET #903

FERNANDINA BEACH, FL 32034 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

STD () Delete (X) Change () Addition REINHART, D. MCGRATH, WILLAIM Name: Name: 2700 MIZELL ST., #704 Address: 1411 SOUTH 14TH STREET, SUITE D Address:

City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

Title: Title: (X) Change () Addition () Delete

KELMERSS, ANDREW D Name: KELMERS, ANDREW D Name: Address: 2700 MIZELL ST. #802 Address: 2700 MIZELL ST. #802

City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

Title: PD() Delete Title: () Change () Addition

LOPER, ALVIN K Name: Name: 2700 MIZELL STREET #903 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: JACOBSEN, QUEN Name: 4110 COLUMNS DRIVE Address: Address: City-St-Zip: MARIETTA, GA 30067 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

LEWIS, PAULA I STORMS, NORMA Name: Name:

3700 MIZELL ST, # 701 2700 MIZELL STREET #101 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

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: ALVIN K. LOPER PD 02/09/2009