

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008370

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** JULINGTON PLAZA OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ONE INDEPENDENT DR  
SUITE 114  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

ONE INDEPENDENT DR  
SUITE 114  
JACKSONVILLE, FL 32202

**New Mailing Address:**

FEI Number: 80-0062119

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGENCY CENTERS  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 US

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

F & L CORP  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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: CHARLES V. HEDRICK, AUTHORIZED SIGNATORY

04/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SVP  
Name: MILLER, KATHY D  
Address: ONE INDEPENDENT DR, SUITE 114  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP  
Name: MAS, MICHAEL J  
Address: ONE INDEPENDENT DRIVE, SUITE 114  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: SVP  
Name: ARGALAS, BARRY  
Address: ONE INDEPENDENT DRIVE, SUITE 114  
City-St-Zip: JACKSONVILLE, FL 32202 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: KATHY D. MILLER

SVP

04/16/2012

Electronic Signature of Signing Officer or Director

Date