2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007244

FILED Apr 04, 2008 Secretary of State

Entity Name: GREENLAND CHASE HOMEOWNERS' ASSOCIATION, INC.

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

ONE SAN JOSE PLACE ONE SAN JOSE PLACE 27

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

PO BOX 57911

JACKSONVILLE, FL 32241

FEI Number: 51-0480172 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:

CARR, LAUREN E CARR, LAUREN E ONE SAN JOSE PLACE ONE SAN JOSE PLACE

SUITE 34 SUITE 27

JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32257 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: 04/04/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

CIRELLO, FRANK B CIRILLO, FRANK B Name: Name: 4686 SUNBEAM ROAD, SUITE 102 Address: 4901 BELFORT RD. STE 140 Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32256

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

JUNKER, SEAN Name: JUNKER, SEAN Name:

Address: 4686 SUNBEAM ROAD, SUITE 102 Address: 4901 BELFORT RD. SUITE 140 City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32256

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

CELLAR, BILL CELLAR, BILL Name: Name: 4686 SUNBEAM ROAD, SUITE 102 4901 BELFOT RD. SUITE 140 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32256

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

Name: MCKISICK, ROB Name: MCKISICK, ROB

4686 SUNBEAM ROAD, SUITE 102 4901 BELFORT RD. SUITE 140 Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32256

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: LAUREN CARR MGR. 04/04/2008