2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03196

FILED May 04, 2006 Secretary of State

Entity Name: THE WHITEHALL OF ST. JOHNS COUNTY, INC.

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

MARVIN REAL ESTATE MARPAM INC 1835 N 3RD ST 245 13TH AVE N

JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

PO BOX 330026 PO BOX 330168

ATLANTIC BEACH, FL 32233 ATLANTIC BEACH, FL 32233

FEI Number: 59-3010091 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MARVIN, SONIA ELDER, MARTHA C 1835 N 3RD STREET 245 13TH AVE N

JACKSONVILLE BEACH, FL 32250 US JACKSONVILLE BEACH, FL 32250 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: MARTHA C ELDER 05/04/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: D (X) Change () Addition

Name: HAILEY, LARRY, Name: HAILEY, LARRY,

Address: 1819 PEACHTREE RD STE 550 Address: 1819 PEACHTREE RD STE 550

City-St-Zip: ATLANTA, GA 30309 City-St-Zip: ATLANTA, GA 30309

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

Name: BOWEN, HAROLD Name: BOWEN, HAROLD

Address: 3290 NORTHSIDE PKWY STE 880 Address: 3290 NORTHSIDE PKWY STE 880

City-St-Zip: ATLANTA, GA 30327 City-St-Zip: ATLANTA, GA 30327

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

 Name:
 HAYES, JO
 Name:

 Address:
 4754 LONG BOW RD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:

Title: DT () Change (X) Addition

Name: Name: MARGESON, JACK

Address: Address: 415 E PACES FERRY RD SUITE 300

City-St-Zip: City-St-Zip: ATLANTA, GA 30305

I hereby certify that the information supplied with this filing does not qualify for the 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: HAROLD BOWEN P 05/04/2006