2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N04000001988

Entity Name: GRAN PARK AT SOUTHPARK PHASE II PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8427 SOUTHPARK CIRCLE
SUITE 140
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

8427 SOUTHPARK CIRCLE
SUITE 140
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANSON, KARL B III
10151 DEERWOOD PARK BLVD
BLDG 100, STE 330
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

HOENER, JAMES A ESQ.
10151 DEERWOOD PARK BLVD
BLDG 100, STE 330
JACKSONVILLE, FL 32256 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: JAMES A. HOENER, ESQ. 04/28/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: STORMES, JEANNE
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: V ( ) Delete
Name: SITZER, DIANE
Address: 8427 SOUTHPARK CIRCLE, SUITE 140
City-St-Zip: ORLANDO, FL 32819 US

Title: DV ( ) Delete
Name: MARVIN, GLENN
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S ( ) Delete
Name: HOENER, JAMES A
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VT ( ) Delete
Name: MUHL, E. JOSEPH JR
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: AS ( ) Delete
Name: POSTON, CHRISTY
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-St-Zip: JACKSONVILLE, FL 32256 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JAMES A. HOENER S 04/28/2008
Electronic Signature of Signing Officer or Director Date