

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007659

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: FERNANDINA CAY CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

463499 SR 200  
YULEE, FL 32097 US

## New Principal Place of Business:

463499 STATE ROAD 200  
YULEE, FL 32097 US

## Current Mailing Address:

PO BOX 1987  
YULEE, FL 320411987 US

## New Mailing Address:

P O BOX 1987  
YULEE, FL 32041 US

FEI Number: 20-1454376

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC  
463499 SR 200  
YULEE, FL 32097 US

## Name and Address of New Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC  
463499 STATE ROAD 200  
YULEE, FL 32097 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: SCOTT STEFFEN

04/18/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LAMB, MIRIAM J  
Address: 2811 ATLANTIC AVE #302  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: VPD ( ) Delete  
Name: HERTZ, JOANN  
Address: 2811 ATLANTIC AVE #304  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: STD ( ) Delete  
Name: SHEEHAN, JAMES  
Address: 1670 HOFIUS LANE  
City-St-Zip: HERMITAGE, PA 16146 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HERTZ, JOANN  
Address: P O BOX 1987  
City-St-Zip: YULEE, FL 32041 US

Title: VPD (X) Change ( ) Addition  
Name: SHEEHAN, JAMES  
Address: P O BOX 1987  
City-St-Zip: YULEE, FL 32041 US

Title: STD (X) Change ( ) Addition  
Name: TAYLOR, TAMMY  
Address: P O BOX 1987  
City-St-Zip: YULEE, FL 32041 US

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: SCOTT STEFFEN

RA

04/18/2009

Electronic Signature of Signing Officer or Director

Date