2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009498

FILED May 18, 2006 Secretary of State

Entity Name: GOLDEN POND SUBDIVISION HOMEOWNER'S ASSOCIATION, INC.

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

2002 SOUTHSIDE BLVD. STE 100B 463499 STATE ROAD 200 JACKSONVILLE, FL 32216 YULEE, FL 32097 US

Current Mailing Address: New Mailing Address:

2002 SOUTHSIDE BLVD. STE 100B P O BOX 1987

JACKSONVILLE, FL 32216 YULEE, FL 320411987 US

FEI Number: 01-0864188 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:

DOYLE, WILLIAM E ESQ
2002 SOUTHSIDE BLVD. STE 100B
JACKSONVILLE, FL 32216 US

PROPERTY MANAGEMENT SYSTEMS, INC
463499 STATE ROAD 300
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: TERRELL J POWELL 05/18/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 STARKE, STEPHEN M
 Name:
 ARNOLD, CHARLES W III

 Address:
 5527 DOVER CREST LANE
 Address:
 11217 SAN JOSE BOULEVARD

 City-St-Zip:
 JACKSONVILLE, FL 32223 US

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

Name: COFFIELD, HAROLD W Name: UDELL, ROBERT

Address: 2743 ANNISTON DRIVE Address: 11217 SAN JOSE BOULEVARD City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32223 US

Title: DS () Change (X) Addition

Name: Name: JOHNSON, SUSAN

Address: Address: 11217 SAN JOSE BOULEVARD
City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32223 US

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: CHARLES W ARNOLD,III DP 05/18/2006