2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2007 8:00 am Secretary of State 02-14-2007 90044 046 ****61.25

DOCUMEN'	Τ#	N0500001	10283
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1. Entity Name



MANOTA	K OAKS CONDOMINIUM AS	SSOCIATION, INC.							
9456 PHILIP	e of Business PS HIGHWAY SUITE 1 LE, FL 32256	Mailing Address 9456 PHILIPS HIGHWAY S JACKSONVILLE, FL 3225			400	IPden			
2. Principal F		3. Mailing Address CO HOY Hand Suite, Apt. #, etc.	gements	5VC					
#50		SUSS ATA S	buth		01302007	Chg-NP	CR2E0	37 (12/06)	
JACKS	ONVILLE FL	City & State St - Ququs	tine Fl	arida	4. FEI Number 20-3800	122		 	plied For t Applicable
322	23 Country USA	32080	Country		5. Certificate of	Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Current R	egistered Agent	Name		7. Name and A	ddress of New F	Registered	Agent	
	AGEMENT SERVICES, INC.			ddross (B	O Pou Numbre	in Not Annatabl	۵۱		
5455 A1A SAINT AU	GUSTINE, FL 32080		Street A		.O. Box Number	is Not Acceptabl	ө) 		
			City				FL	Zip Code	• •
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or	r registere	d agent, or both,	in the State of Fl		familiar with,	and accept
the obligat	ions of registered agent.	O:					1 -	<i>t</i> .	, i
SIGNATURE	Signature, typed or printed name of registered agent ar	Stitle if applicable (NOTE: 8	lagistered Agent signat	ture required v	when reinstation)		/ 5 /	67	
	71				, in the same of		Dr.,_		1
		2 51 / 2							
	Filing Fee Is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Cor			\$5.00 May Be Added to Fees			k payable to rtment of St	
10.	Due by May 1, 2007 OFFICERS AND DIRE	Trust Fund Cor	ntribution.	AI	Added to Fees		rida Depai	RECTORS IN	10
10. TITLE NAME	Due by May 1, 2007	Trust Fund Cor	ntribution.	Pres	Added to Fees DDITIONS/CHAN	Floor	rida Depai	RECTORS IN	10 Addition
TITLE NAME STREET ADDRESS	DP JOHNS, JR., KENNETH L 9456 PHILIPS HIGHWAY SUITE 1	Trust Fund Cor	11. TITLE NAME STREET ADDRESS	Pres	Added to Fees DITIONS/CHAN SIDENT NES, Tr	NGES TO OFFICE	rida Depai RS AND Di inte	RECTORS IN Change	10 Addition
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUNE TROY A. James
SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904)868-568