

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2006
Secretary of State**

DOCUMENT# N05000011048

Entity Name: AUGUSTINE OAKS OFFICE CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8515 BAYMEADOWS WAY, SUITE 102
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8515 BAYMEADOWS WAY, SUITE 102
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 02-0767792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABTREE, R. R
8777 SAN JOSE BLVD
BLDG A, SUITE 200
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LOOSBROCK, FRANK
Address: 8515 BAYMEADOWS WAY, SUITE 102
City-St-Zip: JACKSONVILLE, FL 32256

Title: DV () Delete
Name: GILES, RICK
Address: 8515 BAYMEADOWS WAY, SUITE 102
City-St-Zip: JACKSONVILLE, FL 32256

Title: DST () Delete
Name: STRICKLAND, CHRIS
Address: 8515 BAYMEADOWS WAY, SUITE 102
City-St-Zip: JACKSONVILLE, FL 32256

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:

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: FRANK LOOSBROCK

DP

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date