

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000624

FILED
Feb 15, 2012
Secretary of State

Entity Name: LAS CALINAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O FIRST COAST ASSOCIATION MANAGEMENT LLC
11555 CENTRAL PARKWAY SUITE 801
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

C/O FIRST COAST ASSOCIATION MANAGEMENT LLC
11555 CENTRAL PARKWAY SUITE 801
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 20-8862465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT LLC
11555 CENTRAL PARKWAY SUITE 801
JACKSONVILLE, FL 32224 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
Name: HISSAM, JAMES
Address: 11555 CENTRAL PARKWAY SUITE 801
City-St-Zip: JACKSONVILLE, FL 32224

Title: DVP
Name: WHITE, JOHN F JR
Address: 11555 CENTRAL PARKWAY SUITE 801
City-St-Zip: JACKSONVILLE, FL 32224

Title: DST
Name: LEDET, PAM
Address: 11555 CENTRAL PARKWAY SUITE 801
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

SIGNATURE: JAMES HISSAM

DP

02/15/2012

Electronic Signature of Signing Officer or Director

Date