CORPO ANNUAL	PROFIT DRATION REPORT	Sandra E Secretar DIVISION OF C	TMENT OF STATE D. Mortham ry of State CORPORATIONS			
OCUMI Corporation Na	ENT # N1283	8 (1)				
	RYSIDE AT THE VALLEY I	HOMEOWNERS ASSO	OCIATION			
ncipal Place of	Business	Mailing Address		1 (BB)((B) BB) ((B)) yan yan tarab (()	01 JB14 W1411 W1411 B10+1	Oldie Oldie Billin sabi
.O. BOX 11794 ACKSONVILLE F IS	FL 32239-0794	P.O. BOX 11794 JACKSONVILLE FL 3223 US	9-0794	Date incorporated or Qualified	3a. Date of La	ast Report
				12/31/1985		4/1995
Principal Place	e of Business	2a. Mailing Address 26 P.O. Box 8	n58	4. FEI Number 59-2622279	-	Applied For Not Applicable
Suite, Apt. #, 6		Suite, Apt. #, etc.		5. Certificate of Status Desired		75 Additional se Required
City & State		City & State		6. Election Campaign Financing	\$5	.00 May Be
Jackso	nville, FL	Jacksonvil	le, FL Country	Trust Fund Contribution 8. This corporation has liability for		der s. 199.032,
Zip 32239	Country 25 Duval	29 32239	30 Duval	Florida Statutes 10. Name and Address of New Ro	Yes No	
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New M	egiatorea Agoin	
ELEFAN			82 Street A	Address (P.O. Box Number is Not Accepta	ble)	
1650 PR	udential DR, suite 105					
	MAILLE EL 32207		63			
	NVILLE FL 32207		84 City		E1 85	Zıp Code
JACKSO		2 and £17 1508 Florida Statu	84 City	corporation submits this statement for the	FL I I	,
JACKSO	the provisions of Sections 617.050	2 and 617.1508, Florida Statu of Florida, Such change was ations of, Section 617.0503, F	84 City	corporation submits this statement for the poration's board of directors. I hereby accept	FL I I	,
JACKSO 1. Pursuant to office or reg agent. I am	the provisions of Sections 617.050 jistered agent, or both, in the State familiar with, and accept the obliga		84 City	required when reinstating)	purpose of chango of the appointment	ng its registered t as registered
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