

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24077

FILED
Feb 27, 2009
Secretary of State

Entity Name: FLEMINGBROOK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

767 BLANDING BLVD.
STE 112
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

767 BLANDING BLVD.
STE 112
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 59-2880300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, CHRISTOPHER M
767 BLANDING BLVD
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

HALL, GEORGE H
4736 BLANDING BLVD.
JACKSONVILLE, FL 32210 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: GEORGE H. HALL

02/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, MILEY
Address: 5504 LANDBROOK LANE
City-St-Zip: ORANGE PARK, FL 32003

Title: DT () Delete
Name: VANDERBEEK, EUGENE
Address: 5509 BLOOMWOOD COURT
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: GREEN, CARMANEILA
Address: 475 SPRING BROOK
City-St-Zip: ORANGE PARK, FL 32003

Title: D () Delete
Name: NORWOOD, LEONARD
Address: 471 BAYBROOK
City-St-Zip: ORANGE PARK, FL 32003

Title: D () Delete
Name: BUTLER, ALLISON
Address: 5602 SILKWOOD
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, MILEY
Address: 5504 CANDIBROOK LANE
City-St-Zip: FLEMING ISLAND, FL 32003

Title: T (X) Change () Addition
Name: VANDERBEEK, EUGENE
Address: 5509 BLOOMWOOD COURT
City-St-Zip: FLEMING ISLAND, FL 32073

Title: VP (X) Change () Addition
Name: BIRDSALL, EARL
Address: 5516 CANDIBROOK LANE
City-St-Zip: FLEMING ISLAND, FL 32003

Title: S (X) Change () Addition
Name: NORWOOD, LEONARD
Address: 471 BAYBROOK DRIVE
City-St-Zip: FLEMING ISLAND, FL 32003

Title: CD (X) Change () Addition
Name: BUTLER, ALLISON
Address: 5602 SILKWOOD LANE
City-St-Zip: FLEMING ISLAND, FL 32003

I hereby certify that the information supplied with this filing does not qualify 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: MILEY SMITH

P

02/27/2009

Electronic Signature of Signing Officer or Director

Date