2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26880

FILED Apr 29, 2008 Secretary of State

Entity Name: ORANGE PARK COUNTRY CLUB OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4200 MARSH LANDING BLVD SUITE 200 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

4200 MARSH LANDING BLVD. SUITE 200 JACKSONVILLE BEACH, FL 32250

FEI Number: 59-2987832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARSH LANDING MANAGEMENT CO.
4200 MARSH LANDING BLVD.
4200 MARSH LANDING BLVD.
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5UITE 200
5UITE 200
5UITE 200

JACKSONVILLE BEACH, FL 32250 US JACKSONVILLE BEACH, FL 32250 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: STEPHEN C. LOVELAND 04/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 KNAFELC, FRANK
 Name:
 MACKIN, THOMAS

 Address:
 531 SUGAR GROVE PLACE
 Address:
 2700 COUNTRY CLUB BLVD.

 City-St-Zip:
 ORANGE PARK, FL 32073
 ORANGE PARK, FL 32073

Title: TD () Delete Title: () Change () Addition

 Name:
 KENNEDY, DARLYNN
 Name:

 Address:
 550 GOLDEN LINKS DR.
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:

 Title:
 S
 () Delete
 Title:
 VP
 (X) Change () Addition

 Name:
 HARKNESS, PAT
 Name:
 LAWTON, CHRISTINA

Address: 2836 COUNTRY CLUB BLVD Address: 525 SUGAR GROVE ROAD City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073

Title: VP () Delete Title: S (X) Change () Addition

Name:OTOCKA, EDWARDName:SPARKS, LINDAAddress:3001 COUNTRY CLUB BLVD.Address:576 OAKMONT DRIVECity-St-Zip:ORANGE PARK, FL 32073City-St-Zip:ORANGE PARK, FL 32073

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: THOMAS MACKIN P 04/29/2008