

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004711

FILED  
Apr 27, 2008  
Secretary of State

Entity Name: EMERALD ACRES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

431 WAVERLY ROAD  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

528 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Current Mailing Address:**

431 WAVERLY ROAD  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

528 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

FEI Number: 59-3553912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ISAACS, DAN L  
431 WAVERLY ROAD  
TALLAHASSEE, FL 32312 US

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

ISAACS, DAN L  
528 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: \_\_\_\_\_

04/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: WILLIAMS, KEN  
Address: 2523 OPAL COURT  
City-St-Zip: TALLAHASSEE, FL 32309

Title: DVP ( ) Delete  
Name: AKINS, DONNELL  
Address: 2510 OPAL COURT  
City-St-Zip: TALLAHASSEE, FL 32309

Title: DP ( ) Delete  
Name: COX, JANET  
Address: 8752 OPAL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVP (X) Change ( ) Addition  
Name: MCKINLEY, THEODORE  
Address: 2721 GEMSTONE LANE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JANET COX

DP

04/27/2008

Electronic Signature of Signing Officer or Director

Date