

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 25, 2005  
Secretary of State**

DOCUMENT# N98000001087

Entity Name: AUSTIN-BAYMEADOWS ASSOCIATION, INC.

**Current Principal Place of Business:**

4465 BAYMEADOWS RD  
#3  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

**Current Mailing Address:**

4465 BAYMEADOWS RD  
#3  
JACKSONVILLE, FL 32217

**New Mailing Address:**

FEI Number: 59-3591083      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TILLEY, STEPHEN  
4465 BAYMEADOWS RD  
#3  
JACKSONVILLE, FL 32217 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: VPD ( ) Delete  
Name: GIBNEY, JACK  
Address: 4465 BAYMEADOW RD #2  
City-St-Zip: JACKSONVILLE, FL 32217

Title: SD ( ) Delete  
Name: LUTZ, MICHAEL  
Address: 4465 BAYMEADOW RD #5  
City-St-Zip: JACKSONVILLE, FL 32217

Title: PD ( ) Delete  
Name: TILLEY, STEPHEN E  
Address: 4465 BAYMEADOW RD #3  
City-St-Zip: JACKSONVILLE, FL 32217

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN E. TILLEY

PRES

02/25/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date