

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005016

FILED  
Mar 21, 2006  
Secretary of State

Entity Name: WALKERS GLEN HOMEOWNERS ASSOCIATION OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

2222 WALKERS GLEN LANE  
JACKSONVILLE, FL 32246 US

**New Principal Place of Business:**

12187 - 4 BEACH BLVD  
JACKSONVILLE, FL 32246 US

**Current Mailing Address:**

12620-3 BEACH BLVD  
301  
JACKSONVILLE, FL 32246 US

**New Mailing Address:**

FEI Number: 59-3148658      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

JARNUTOWSKI, SHERRIE  
12620-3 BEACH BLVD  
301  
JACKSONVILLE, FL 32246 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: P ( ) Delete  
Name: CARVER, JOE  
Address: 12021 WALKERS GLEN LANE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP ( ) Delete  
Name: CRABTREE, GENE  
Address: 2209 WALKERS GLEN LANE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: S ( ) Delete  
Name: GREER, LAURA  
Address: 2270 WALKERS GLEN LANE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: T ( ) Delete  
Name: CLARK, MARILYN  
Address: 12159 IRWIN MANOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete  
Name: HILLIARD, AARON  
Address: 2166 WALNUT CREEK COURT NORTH  
City-St-Zip: JACKSONVILLE, FL 32246

**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:

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 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: JOE CARVER

PRES

03/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date