

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158637

FILED
Apr 25, 2006
Secretary of State

Entity Name: MONTECITO STONECREEK, INC.

Current Principal Place of Business:

7785 BAYMEADOWS WAY
SUITE 200
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7785 BAYMEADOWS WAY
SUITE 200
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-1913255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXWELL, DOUGLAS R
10739 DEERWOOD PARK BLVD.
SUITE 200A
JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONK, EDWARD W
Address: 333 FIRST STREET NORTH, SUITE 105
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: CONK, JOELLYN
Address: 333 FIRST STREET NORTH, SUITE 105
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: CONK, CHRISTOPHER
Address: 333 FIRST STREET NORTH, SUITE 105
City-St-Zip: JACKSONVILLE, FL 32250

Title: VP () Delete
Name: ROGERS, BILL
Address: 333 NORTH FIRST STREET, SUITE 310
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP () Delete
Name: PORTER, JIM
Address: 333 NORTH FIRST STREET, SUITE 310
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP () Delete
Name: LONG, JAN
Address: 333 NORTH FIRST STREET, SUITE 310
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONK, EDWARD W
Address: 7785 BAYMEADOWS WAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change () Addition
Name: CONK, JOELLYN
Address: 7785 BAYMEADOWS WAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change () Addition
Name: CONK, CHRISTOPHER
Address: 7785 BAYMEADOWS WAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: ROGERS, BILL
Address: 7785 BAYMEADOWS WAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: PORTER, JIM
Address: 7785 BAYMEADOWS WAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: LONG, JAN
Address: 7785 BAYMEADOWS WAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD CONK

Electronic Signature of Signing Officer or Director

PTR

04/25/2006

_____ Date