2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007988

Jul 22, 2005 Secretary of State

Entity Name: ACORN PARKE HOMEOWNERS ASSOCIATION, INC.

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

10411 ALTA DR. PO BOX 26322

JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

PO BOX 26322

JACKSONVILLE, FL 32218

FEI Number: 59-3756754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DIXON, CHARLES E III

JAMES, VALERIE 10411 ÁLTA DR. 10935 SAWTOOTH OAK CT JACKSONVILLE, FL 32226 US JACKSONVILLE, FL 32218 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: VALERIE JAMES 07/22/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

SCHWEITZER, NATHAN W MACKEY, TRACY Name: Name: 10909 ACORN PARK CT Address: DARLINGTON OAK CT Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

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

YOUNG, KIMBERLY GENEVA, HILLIARD Name: Name: Address: ACORN PARK CT Address: ACORN PARK DR City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

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

DEVON, JUDD Name: FRYER, M. Name:

ACORN PARK CT Address: Address: DARLINGTON OAK CT City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

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

CORNELIUS, MATTHEWS Name: Name: MCGHEE, GREG Address: ACORN PARK CT Address: SAWTOOTH OAK CT City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

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

BLAKELY, DEMETRIUS Name: Name: DARLINGTON OAK Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32218

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

JAMES, VALERIE Name: Name: Address: Address: SAWTOOTH OAK CT JACKSONVILLE, FL 32218 City-St-Zip: 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: M. ALEXANDER Т 07/22/2005