2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

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Entity Name: DRAYTON PLACE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12166 BIGGLY COURT
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

12620-3 BEACH BLVD. #301
JACKSONVILLE, FL 32246 US

Current Mailing Address:

P.O. BOX 19004
JACKSONVILLE, FL 32246 US

New Mailing Address:

12620-3 BEACH BLVD. #301
JACKSONVILLE, FL 32246 US

FEI Number: 59-3425853 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAGLIAFERRI, DAVID L
12166 BIGGLY COURT
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

JARNU, SHERRIE
12620-3 BEACH BLVD. #301
JACKSONVILLE, FL 32246 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: SHERRIE JARNUTOWSKI 02/08/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LITTLETON, JIM
Address: 12182 NOYES CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: V ( ) Delete
Name: MONSOUR, LOUIS
Address: 4334 RIPKEN CIR W
City-St-Zip: JACKSONVILLE, FL 32224

Title: T ( ) Delete
Name: TAFLIAFERRI, SANDRA
Address: 12166 BIGGLY CT.
City-St-Zip: JACKSONVILLE, FL 32224

Title: S (X) Delete
Name: TAGLIAFERRI, DAVID
Address: 12166 BIGGLY CRT
City-St-Zip: LAKE CITY, FL 32024

Title: D (X) Delete
Name: TAYLOR, SANDY
Address: 12177 MANTLE DR
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TAYLOR, SANDY
Address: 12177 MANTLE DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: D (X) Change ( ) Addition
Name: KAELIN, DAN
Address: 4364 RIPLIN CIRCLE W
City-St-Zip: JACKSONVILLE, FL 32224

Title: S (X) Change ( ) Addition
Name: NICHOLAS, DENISE
Address: 4316 RIPLIN CIRCLE W
City-St-Zip: JACKSONVILLE, FL 32224

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: SHERRIE JARNUTOWSKI RA 02/08/2007
Electronic Signature of Signing Officer or Director Date