2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# N07000003876

Entity Name: ABIGAIL ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11945 SAN JOSE BLVD.
BLDG. 300
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 US

Current Mailing Address:

11945 SAN JOSE BLVD.
BLDG. 300
JACKSONVILLE, FL 32223 US

New Mailing Address:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DONNELLY, KEITH
11945 SAN JOSE BLVD.
BLDG. 300
JACKSONVILLE, FL FL US

Name and Address of New Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 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: FIRST COAST ASSOCIATION MANAGEMENT 02/25/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: REYNOLDS, GLEN
Address: 11945 SAN JOSE BLVD., BLDG. 300
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP ( ) Delete
Name: DONNELLY, KEITH
Address: 11945 SAN JOSE BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: S/T ( ) Delete
Name: DEMOTT, DENNIS
Address: 11945 SAN JOSE BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32223 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DEMOTT, DARREN
Address: 11945 SAN JOSE BLVD., BLDG. 300
City-St-Zip: JACKSONVILLE, FL 32223 US

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

Title: S/T (X) Change ( ) Addition
Name: ECKLOFF, REBECCA
Address: 11945 SAN JOSE BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32223 US

I hereby certify that the information supplied with this filing does not qualify 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: FIRST COAST ASSOCIATION MANAGEMENT RA 02/25/2009
Electronic Signature of Signing Officer or Director Date