I hereby 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 all other like empowered.

SIGNATURE: KATHY D. MILLER

Electronic Signature of Signing Officer/Director Detail

SVP

04/30/2013

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0200008370

Entity Name: JULINGTON PLAZA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ONE INDEPENDENT DR SUITE 114 JACKSONVILLE, FL 32202

Current Mailing Address:

ONE INDEPENDENT DR SUITE 114 JACKSONVILLE, FL 32202

FEI Number: 80-0062119

Name and Address of Current Registered Agent:

F & L CORP ONE INDEPENDENT DRIVE **SUITE 1300** JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Officer/Director Detail :			
Title	SVP	Title	VP
Name	MILLER, KATHY D	Name	MAS, MICHAEL J
Address	ONE INDEPENDENT DR, SUITE 114	Address	ONE INDEPENDENT DRIVE, SUITE
City-State-Zip:	JACKSONVILLE FL 32202		114
		City-State-Zip:	JACKSONVILLE FL 32202
Title	SVP		
Name	ARGALAS, BARRY		
Address	ONE INDEPENDENT DRIVE, SUITE 114		

City-State-Zip: JACKSONVILLE FL 32202

Certificate of Status Desired: No

FILED Apr 30, 2013 Secretary of State CC2296957826

Date

Date