

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003856

Entity Name: OLD SAN JOSE ON THE RIVER SUNSET VIEW CONDOMINIUM ASSOCIATION, INC.**FILED**
Jan 27, 2014
Secretary of State
CC9507824833**Current Principal Place of Business:**11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224**Current Mailing Address:**11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 US**FEI Number: 45-1777643****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FIRST COAST ASSOCIATION MANAGEMENT, LLC
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:** ALICE HUBBARD

01/27/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name LEE, WALTER M.
Address 11555 CENTRAL PARKWAY
SUITE 801
City-State-Zip: JACKSONVILLE FL 32224**Title** TREASURER / SECRETARY
Name SMITH, HARTMAN W.
Address 11555 CENTRAL PARKWAY
SUITE 801
City-State-Zip: JACKSONVILLE FL 32224**Title** DIRECTOR
Name KELLY, MIMI
Address 11555 CENTRAL PARKWAY
SUITE 801
City-State-Zip: JACKSONVILLE FL 32224**Title** VP
Name DAVIS, FRANK M.
Address 11555 CENTRAL PARKWAY
SUITE 801
City-State-Zip: JACKSONVILLE FL 32224**Title** DIRECTOR
Name WATTS, JAMES W.
Address 11555 CENTRAL PARKWAY
SUITE 801
City-State-Zip: JACKSONVILLE FL 32224

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: WALTER M. LEE

PRESIDENT

01/27/2014

Electronic Signature of Signing Officer/Director Detail

Date