2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726704

FILED Mar 23, 2009 Secretary of State

Entity Name: BEAU RIVAGE OF JACKSONVILLE, INC.

Current Principal Place of Business:

New Principal Place of Business:

2970 ST JOHNS AVENUE JACKSONVILLE, FL 32205

Current Mailing Address:

New Mailing Address:

8641 BAYPINE RD 7400 BAYMEADOWS WAY SUITE 317 STE 1

FEI Number Applied For ()

JACKSONVILLE, FL 32256

JACKSONVILLE, FL 32256

FEI Number: 59-1567787

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PROPERTY SERVICES INC COMMUNITY MANAGEMENT CONCEPTS, INC. 7400 BAYMEADOWS WAY

8641 BAYPINE RD SUITE 1 JACKSONVILLE, FL 32256 US

SUITE 317

JACKSONVILLE, FL 32256 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: SHERRILL SCHAFER 03/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

SHEU, WILLIAM SCHEU, WILLIAM Name: Name: 2970 ST JOHNS AVE 8-G Address: 2970 ST JOHNS AVE. # 8-G Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

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

FOX, CAROLYN Name: FOX, CAROLYN Name: Address: 2970 ST JOHNS AVE. 12F Address: 2970 ST JOHNS AVE. #12F

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

Title: () Delete Title: DIR (X) Change () Addition ARMSTRONG, KAY ARMSTRONG, KAY Name: Name:

2970 ST JOHNS AVE 2A 2970 ST JOHNS AVE. #2A Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

Title: () Delete Title: DIR (X) Change () Addition LOFTIN, CURTÍS Name: Name: CANTRELL, HOWARD

Address: 2970 ST JOHNS AVE 9A Address: 2970 ST JOHNS AVE. #6G City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

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

CANTRELL, HEYWARD JOHNSON, MIKE Name: Name:

2970 ST JOHNS AVE 6G 2970 ST JOHNS AVE. #11A Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

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: SHERRILL SCHAFER **PRES** 03/23/2009

Electronic Signature of Signing Officer or Director

Date