2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743998

FILED Apr 29, 2007 Secretary of State

Entity Name: TEAKWOOD VILLAS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1220 BRETTA STREET JACKSONVILLE, FL 32211

Current Mailing Address: New Mailing Address:

6015 MORROW ST E SUITE 107 JACKSONVILLE, FL 32217

FEI Number: 59-1982356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BANNING MANAGEMENT INC 6015 MORROW ST E SUITE 107 JACKSONVILLE, FL 32217 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:

Name:

Address:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete BENNETT, TONY SLABA, PAUL Name: 1220 BRETTA ST, 18 Address: 1220 BRETTA ST, 15 City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL 32211

Title: VPD () Delete Title: (X) Change () Addition ALLEYNE, JOHN Name: ALLEYNE, JOHN Name:

Address: 1200 BRETTA STREET #13 Address: 1200 BRETTA STREET #13 City-St-Zip: JACKSON VILLE, FL 32211 City-St-Zip: JACKSON VILLE, FL 32211

Title: DTS () Delete Title: PD (X) Change () Addition NELSON, JUDI NELSON, JUDI Name: Name:

1200 BRETTA ST 33 Address: Address: 1200 BRETTA ST 33 City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32211

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

Name: Name: LAMBEZ, LEAH Address: Address: 134 5TH STREET S

City-St-Zip: City-St-Zip: JACKSONVILLE BCH, FL 32250

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: NELSON PD 04/29/2007