## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#751606** 

FILED Jan 04, 2006 Secretary of State

Entity Name: SPINNAKER CONDOMINIUM ASSOCIATION, INC.

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

410 S 1ST ST

JACKSONVILLE BEACH, FL 322505

Current Mailing Address: New Mailing Address:

1803 8 STREET NORTH 1755 BRANCH VINE DRIVE WEST JACKSONVILLE BEACH, FL 32250 US JACKSONVILLE, FL 32246 US

FEI Number: 59-2539871 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:

STANLEY, KIM STANLEY, KIM

1803 8 STREET NORTH 1755 BRANCH VINE DRIVE WEST JACKSONVILLE BEACH, FL 32250 US JACKSONVILLE, FL 32246 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: KIM STANLEY 01/04/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ()Delete Title: ()Change()Addition

 Name:
 ROSSIE, NEWMAN
 Name:

 Address:
 11891 HIDDEN HILLS DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ROSSIE, MICHELLE
 Name:

 Address:
 11891 HIDDEN HILLS DR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

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

 Name:
 DELEACH, RANDY
 Name:
 DELOACH, RANDY

 Address:
 59-34TH AVE SOUTH
 Address:
 59-34TH AVE SOUTH

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KIM STANLEY MGR 01/04/2006