2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2009
Secretary of State

DOCUMENT# 756423

Entity Name: ST. JUDE HARBOR, UNIT 2 , PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3331 FRANZONE RD
ST. JAMES CITY, FL 33956

New Principal Place of Business:

Current Mailing Address:

3331 FRANZONE RD
ST. JAMES CITY, FL 33956 US

New Mailing Address:

3331 FRANZONE RD
ST. JAMES CITY, FL 33956

FEI Number: 59-2123262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENDALL, JOHN A
3331 FRANZONE RD
ST. JAMES CITY, FL 33956 US

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	CERNICKY, JAREN P	
Address:	3203 FRANZONE RD	
City-St-Zip:	SAINT JAMES CITY, FL 33956	
Title:	VPD	( ) Delete
Name:	DINGER, PAUL	
Address:	3423 STABILE RD	
City-St-Zip:	SAINT JAMES CITY, FL 33956	
Title:	SD	( ) Delete
Name:	CERNICKY, GERALDINE N	
Address:	3272 STABILE RD	
City-St-Zip:	SAINT JAMES CITY, FL 33956	
Title:	TD	( ) Delete
Name:	KENDALL, JOHN A	
Address:	3331 FRANZONE RD.	
City-St-Zip:	SAINT JAMES CITY, FL 33956	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: JOHN A. KENDALL TD 03/08/2009

Electronic Signature of Signing Officer or Director — Date