2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762682

FILED Jul 12, 2006 Secretary of State

Entity Name: TWELVE OAKS ASSOCIATION, INC.

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

2300 TWELVE OAKS DR., #T-1 ORANGE PARK, FL 32065

Current Mailing Address: New Mailing Address:

2300 TWELVE OAKS DR., #T-1 ORANGE PARK, FL 32065

FEI Number: 59-2282933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DELCOMYN, VINA C DELCOMYN, VINA C 4759 LEOPARD CIRCLE 4213 C.R. 218

MIDDLEBURG, FL 32068 US MIDDLEBURG, FL 32068 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: VINA C. DELCOMYN 07/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: DP () Delete Title: DP (X) Change () Addition me: TRONIO, DONNA Name: ELDER, NANCY

 Name:
 TRONIO, DONNA
 Name:
 ELDER, NANCY

 Address:
 1316 PLAINFIELD AVE
 Address:
 2300 TWELVE OAKS DRIVE

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:
 ORANGE PARK, FL 32065

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

 Name:
 MARTIN, RICHARD
 Name:
 BANKS, BRENDA

 Address:
 2300 TWELVE OAKS G4
 Address:
 2300 TWELVE OAKS D1

 City-St-Zip:
 ORANGE PARK, FL 32065
 City-St-Zip:
 ORANGE PARK, FL 32065

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

 Name:
 MELSON, LISA
 Name:
 TERRY, KIM E

 Address:
 2300 TWELVE OAKS G3
 Address:
 4268 POWDER HORN COURT

City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: MIDDLEBURG, FL 32068

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

 Name:
 KOLLASCH, DAVID
 Name:

 Address:
 2300 TWELVE OAKS DRIVE # D-3
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32065
 City-St-Zip:

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: NANCY ELDER DP 07/12/2006