

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764530

FILED
Mar 10, 2009
Secretary of State

Entity Name: FRANCES COURT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PROFESSIONAL COMMUNITY MGT. INC.
786 BLANDING BLVD. # 118
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

PROFESSIONAL COMMUNITY MGT. INC.
786 BLANDING BLVD. # 118
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 59-2388295 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALAN PERRY
785 BLANDING BLVD. # 118
ORANGE PARK, FL 32065 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: DP () Delete
Name: CHARNECO, TONI,
Address: 1902 SALT MYRTLE LN
City-St-Zip: FLEMING ISLAND, FL 32003

Title: DV () Delete
Name: WOODROW, AMERSON
Address: 2545 OAK ST # 16
City-St-Zip: JACKSONVILLE, FL 32204

Title: DS () Delete
Name: POGGIE, VICTOR
Address: 2051 SUNSET RIVER DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: POGGIE, YVONNE
Address: 2545 OAK ST #11
City-St-Zip: JACKSONVILLE, FL 32204

Title: DT () Delete
Name: WOJCIK, JACKIE
Address: 2545 OAK ST #7
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: CARR, MELISSA
Address: 941 PARADISE CIRCLE
City-St-Zip: ATLANTIC BEACH, FL 32233

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

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

Title: DT (X) Change () Addition
Name: GEORGE, SKIP
Address: 2545 OAK ST #8
City-St-Zip: JACKSONVILLE, FL 32204

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: ALAN PERRY

RA

03/10/2009

Electronic Signature of Signing Officer or Director

_____ Date