


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2008 8:00 am**  
**Secretary of State**

03-24-2008 90076 007 \*\*\*\*61.25

**DOCUMENT # 765834**

1. Entity Name  
**VILLAGE GREEN AT BAYMEADOWS PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business  
**7628 BAYONMEADOWS CIRCLE W JACKSONVILLE, FL 32256**

Mailing Address  
**8641 BAYPINE ROAD, SUITE 1 JACKSONVILLE, FL 32256**

**50001470**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

01142008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number  
**59-2249685**

Applied For  
 Not Applicable

City & State

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**PROPERTY SERVICES INC**  
**8641 BAYPINE ROAD, SUITE 1**  
**JACKSONVILLE, FL 32256**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	HADDIX, KEN	7610 BAYMEADOWS CIRCLE W #203	JACKSONVILLE, FL 32256	<input type="checkbox"/>
S	FRANCIS, SHARON	7629 PUTTERS COVE DRIVE	JACKSONVILLE, FL 32256	<input type="checkbox"/>
VP	LEWIS, GAIL	7623 BAYMEADOWS CIRCLE W #2074	JACKSONVILLE, FL 32256	<input type="checkbox"/>
D	HUGHES, MARY L	7701 BAYMEADOWS CIRCLE W #1165	JACKSONVILLE, FL 32256	<input type="checkbox"/>
T	STRATTON, KAY	7701 BAYMEADOWS CIRCLE WEST #154	JACKSONVILLE, FL 32256	<input type="checkbox"/>
				<input type="checkbox"/>

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
D	Land- Hughes, mary	7701 Baymeadows Circle w #1165	Jacksonville, FL 32256	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
T	Stratton, Kay	7701 Baymeadows circle w #1154	Jacksonville, FL 32256	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:** \_\_\_\_\_ **3/20/08** **904-731-9500**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #