

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005338

FILED
Jan 26, 2008
Secretary of State

Entity Name: NORTHEAST FLORIDA ASSOCIATION OF RESIDENTIAL PROPERTY MANAGERS CHAPTER OF THE NATIONAL ASSOCIATION OF RESIDENTIAL PROPERTY MANAGERS, INC.

Current Principal Place of Business:

254 THIRD ST
NEPTUNE BEACH, FL 32266

New Principal Place of Business:

Current Mailing Address:

254 THIRD ST
NEPTUNE BEACH, FL 32266

New Mailing Address:

FEI Number: 03-0462300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODGES, MICHAEL G
254 THIRD ST
NEPTUNE BEACH, FL 32266 US

Name and Address of New Registered Agent:

HOTCHKISS, MARYSE N
S LEGACY TRAIL
B-118
ST AUGUSTINE, FL 32092 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: MARYSE HOTCHKISS

01/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAGGIORE, NANCY
Address: 9428 BAYMEADOWS ROAD, SUITE 137
City-St-Zip: JACKSONVILLE, FL 32256

Title: PED () Delete
Name: MCSWAIN, JACK L
Address: 254 THIRD STREET
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: S () Delete
Name: BOOZER, DEBRA
Address: 6983 103RD STREET SUITE 6
City-St-Zip: JACKSONVILLE, FL 32210

Title: T () Delete
Name: HODGES, MICHAEL G
Address: 254 THIRD ST
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCSWAIN, JACK
Address: 254 THIRD STREET
City-St-Zip: NEPTUNE BEACH, FL 32256

Title: VP (X) Change () Addition
Name: HOTCHKISS, MARYSE N
Address: 335 S LEGACY TRAIL #B-118
City-St-Zip: ST. AUGUSTINE, FL 32092

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: MARYSE HOTCHKISS

VP

01/26/2008

Electronic Signature of Signing Officer or Director

Date