## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000005822

FILED Mar 13, 2009 Secretary of State

Entity Name: THE TOWNHOMES AT CANDELERO COURT ASSOCIATION, INC.

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

C/O MAY MGMT 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

C/O MAY MGMT 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080

FEI Number: 59-3670968 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MARKS, ANNA M MMS

5455 A1A SOUTH

MARKS, ANNA

5455 A1A S

SAINT AUGUSTINE, FL 32080 US SAINT AUGUSTINE, FL 32080 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: ANNA MARKS 03/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tte: P/D ( ) Delete Title: T (X) Change ( ) Addition

Name: HAYFLICK, ROBERT Name: HAYFLICK, ROBERT

Address: 3819 LA VISTA CIRCLE Address: 5455 A1A S

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: ST AUGUSTINE, FL 32080

Title: VPD ( ) Delete Title: P (X) Change ( ) Addition Name: MICHAEL, JOHN Name: MICHAEL, JOHN

 Name:
 MICHAEL, JOHN
 Name:
 MICHAEL, JOHN

 Address:
 3839 LA VISTA CIRCLE
 Address:
 5455 A1A S

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: ST AUGUSTINE, FL 32080

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

Name: JONES, ARTHUR Name: JONES, ARTHUR Address: 3833 LA VISTA CIRCLE Address: 5455 A1A S

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: ST AUGUSTINE, FL 32080

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

Name: VAGENAS, DAPHNE Name: VAGENAS, DAPHNE

Address: 3829 LA VISTA CIRCLE Address: 5455 A1A S

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: ST AUGUSTINE, FL 32080

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 MICHAEL P 03/13/2009