

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# N01000000142

Entity Name: ST. JOHNS GOLF & COUNTRY CLUB COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3732426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIRST COAST ASSOC. MANAGEMENT
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 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: FIRST COAST ASSOCIATION MANAGEMENT

01/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VON STEIN, NEAL J
Address: 265 ST JOHNS GOLF DR
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: VP () Delete
Name: WILLIAMS, KERRY
Address: 1589 DRURY COURT
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: S () Delete
Name: HATHAWAY, LISA
Address: 1974 GLENFIELD CROSSING COURT
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: T () Delete
Name: BRADY, JAMES
Address: 1072 MEADOWVIEW LANE
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: DIR (X) Delete
Name: RANDOLPH, EDWARD
Address: 2056 GLENFIELD CROSSING COURT
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WELCH, CHRISTINA
Address: 1832 CROSS POINTE WAY
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D (X) Change () Addition
Name: RANDOLPH, EDWARD
Address: 2056 GLENFIELD CROSSING COURT
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D (X) Change () Addition
Name: YURO, MICHAEL
Address: 1001 MEADOW VIEW LANE
City-St-Zip: SAINT 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: FIRST COAST ASSOCIATION MANAGEMENT

RA

01/22/2009

Electronic Signature of Signing Officer or Director

Date