

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90033 001 ****61.25

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1. Entity Name
BLUE JAY RIDGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
C/O FOREHAND REALTY CO
6640 103RD STREET
JACKSONVILLE, FL 32210

Mailing Address
C/O FOREHAND REALTY CO
6640 103RD STREET
JACKSONVILLE, FL 32210



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03182008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3757990

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FOREHAND, MARIE
6640 103RD STREET
JACKSONVILLE, FL 32210

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP ☐ Delete
NAME STRAM, JOHN
STREET ADDRESS 5670 CHIRPING WAY W
CITY-ST-ZIP JACKSONVILLE, FL 32222

TITLE **PRESIDENT** ☐ Change ☒ Addition
NAME **Beau Buchheit**
STREET ADDRESS **5630 Chirping Way W.**
CITY-ST-ZIP **JACKSONVILLE, FL 32222**

TITLE S ☐ Delete
NAME COOK, DENISE
STREET ADDRESS 5661 CHIRPING WAY W
CITY-ST-ZIP JACKSONVILLE, FL 32222

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME NEITZ, LAUREN
STREET ADDRESS 5718 BIRDS NEST LANE
CITY-ST-ZIP JACKSONVILLE, FL 32222

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **BEAU BUCHHEIT - PRESIDENT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/08
Date

904-545-2196
Daytime Phone #