

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006050

FILED
Apr 28, 2010
Secretary of State

Entity Name: MAYFIELD OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3103 SILVERADO CIR
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

8282 WESTERN WAY CIRCLE
SUITE # 1149
JACKSONVILLE, FL 32256

Current Mailing Address:

P.O. BOX 65936
ORANGE PARK, FL 32065

New Mailing Address:

8282 WESTERN WAY CIRCLE
SUITE # 1149
JACKSONVILLE, FL 32256

FEI Number: 59-3735336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGERS, BARBARA M
8282 WESTERN WAY CIRCLE
STE #1101
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

ROGERS, BARBARA M
8282 WESTERN WAY CIRCLE
STE #1149
JACKSONVILLE, FL 32256 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: BARBARA M. ROGERS

04/28/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CARTER, JAMES W
Address: 3491 TALISMAN DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: DST
Name: EHRENBURG, MARIANNE
Address: 3502 TALISMAN DR.
City-St-Zip: MIDDLEBURG, FL 32068

Title: DVP
Name: BERNHARD, JOHN
Address: 3284 TALISMAN DR
City-St-Zip: MIDDLEBURG, FL 32068

I hereby 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 all other like empowered.

SIGNATURE: HENRY DAVID ROGERS, JR. MANAGER

LCAM

04/28/2010

Electronic Signature of Signing Officer or Director

Date