## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000007012

FILED Apr 22, 2008 Secretary of State

Entity Name: EMILY'S WALK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
003 HAR	RE REALTY TLEY RD. IVILLE, FL 322:	57			
current Mailing Address:			New Mailing Address:		
003 HAR	RE REALTY TLEY RD. IVILLE, FL 322	57			
El Number	: 59-3649058	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
lame and	d Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
C/O SIGNA 003 HAR ACKSON	.L, BRYAN ATURE REALT TLEY RD. IVILLE, FL 322:	57 US			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing i	its registered office or registered agent, or bo	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITION	NS/CHANGES TO OFFICERS AND DIRECT	
itle: ame: ddress: ity-St-Zip:	PD () GALLIHER, SUS 1147 EMILY'S V JACKSONVILLE	VALK LANE E	Title: Name: Address: City-St-Zip:	()Change ()Addition	
tle: ame: ddress: ity-St-Zip:	VPD () BRYAN, WALTE 1057 MORNING JACKSONVILLE	STROLL LANE	Title: Name: Address: City-St-Zip:	VPD (X) Change ( ) Addition LUDWIG, SYLVIA 1087 VICTORY LAKE DR. JACKSONVILLE, FL 32221	
itle: ame: ddress: ity-St-Zip:	SD () FREITAS, ROBE 1032 MORNING JACKSONVILLE	STROLL LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
tle: ame: ddress:	TD () PEACOCK, NAN 1110 EMILEY'S JACKSONVILLE	WALK LANE E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
ity-St-Zip:		Delete	Title: Name:	D ( ) Change (X) Addition JOLLY, REGINALD	
	()		Address: City-St-Zip:	1041 EMILY'S WALK LANE E. JACKSONVILLE, FL 32221	

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: SUSAN GALLIHER PD 04/22/2008