

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007382

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** PALENCIA PROPERTY OWNERS ASSOCIATION OF ST. JOHNS COUNTY, INC.

**Current Principal Place of Business:**

605 PALENCIA CLUB DRIVE  
ST. AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

605 PALENCIA CLUB DRIVE  
ST. AUGUSTINE, FL 32095

**New Mailing Address:**

**FEI Number:** 60-0002643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, DAN  
HINES PALENCIA PROPERTY MANAGEMENT, LLC  
605 PALENCIA CLUB DRIVE  
ST. AUGUSTINE, FL 32095 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** VP  
**Name:** RIO, PAUL  
**Address:** 1879 N. LOOP PARKWAY  
**City-St-Zip:** ST. AUGUSTINE, FL 32095

**Title:** D  
**Name:** MC DANIEL, STEPHEN S  
**Address:** 701 CYPRESS CROSSING TRAIL  
**City-St-Zip:** ST. AUGUSTINE, FL 32095

**Title:** P  
**Name:** O'SHEA, WALTER R  
**Address:** 605 PALENCIA CLUB DR  
**City-St-Zip:** ST. AUGUSTINE, FL 320958401

**Title:** D  
**Name:** DICKMAN, DANIEL  
**Address:** 1492 NORTH LOOP PKWY  
**City-St-Zip:** ST. AUGUSTINE, FL 32095

**Title:** SD  
**Name:** LUMLEY, NAOMI  
**Address:** 605 PALENCIA CLUB DRIVE  
**City-St-Zip:** ST. AUGUSTINE, FL 320958401

**Title:** T  
**Name:** JONES, DAN  
**Address:** 605 PALENCIA CLUB DR  
**City-St-Zip:** SAINT AUGUSTINE, FL 32095

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:** DAN JONES

T

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date