

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01546

FILED
Mar 19, 2007
Secretary of State

Entity Name: VILLAGES OF SAN JOSE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AWAKENINGS ASSOC. MGMT, INC.
4213 COUNTY RD 218 SUITE 1
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

C/O AWAKENINGS ASSOC. MGMT, INC.
4213 COUNTY RD 218 SUITE 1
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: 59-2473109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELCOMYN, VINA
4213 COUNTY RD 218
SUITE 1
MIDDLEBURG, FL 32068 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: PD () Delete
Name: LAKE, RAY
Address: 4008 LA VISTA CIR.
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: GOLDSTEIN, BEVERLY
Address: 3820 LAVISTA CIRCLE H116
City-St-Zip: JACKSONVILLE, FL 32217

Title: SD () Delete
Name: BRUST, ESTELLE
Address: 4069 MIZNER CT. SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP () Delete
Name: MARS, MARY
Address: 4020 LA VISTA CIRCLE H212
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: COYLE, JACK
Address: 4175 PALOMA POINT COURT
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DENIS, PLUMB
Address: 8463 MIZNER CIRCLE EAST
City-St-Zip: JACKSONVILLE, FL 32217

Title: S (X) Change () Addition
Name: ELDRETH, MARY ANNE
Address: 4120 PRIMA VISTA
City-St-Zip: JACKSONVILLE, FL 32217

Title: T (X) Change () Addition
Name: BRUST, ESTELLE
Address: 4069 MIZNER CT. SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP (X) Change () Addition
Name: RENFRO, MARK
Address: 4159 PALOMA POINT COURT
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change () Addition
Name: HAYFLICK, ROBERT
Address: 3819 LA VISTA CIRCLE
City-St-Zip: JACKSONVILLE, FL 32217

I hereby certify that the information supplied with this filing does not qualify for the 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: DENIS PLUMB

PRES

03/19/2007

Electronic Signature of Signing Officer or Director

Date