2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005
Secretary of State

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Entity Name: WYNGATE FOREST OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6620 SOUTHPOINT DRIVE
SUITE 400
JACKSONVILLE, FL 32216

New Principal Place of Business:

3275 WARNELL DRIVE
JACKSONVILLE, FL 32216

Current Mailing Address:

6620 SOUTHPOINT DRIVE
SUITE 400
JACKSONVILLE, FL 32216

New Mailing Address:

P.O. BOX 550946
JACKSONVILLE, FL 32255

FEI Number: 16-1621786 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CRAIG, SEAN M
8311 WARLIN DRIVE SOUTH
JACKSONVILLE, FL 32216 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: SEAN M. CRAIG 03/21/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SMITH, CLINTON
Address: 6620 SOUTHPOINT DRIVE SUITE 400
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPD ( ) Delete
Name: LEWIS, KIM
Address: 6620 SOUTHPOINT DRIVE SUITE 400
City-St-Zip: JACKSONVILLE, FL 32216

Title: STD ( ) Delete
Name: GOULD, ANGELA
Address: 6620 SOUTHPOINT DR. STE 400
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change (X) Addition
Name: SMITH, CLINTON
Address: 3275 WARNELL DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPD (X) Change (X) Addition
Name: LEWIS, KIM
Address: 8308 WARLIN DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

Title: STD (X) Change ( ) Addition
Name: CRAIG, SEAN
Address: 8311 WARLIN DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SEAN M. CRAIG STD 03/21/2005
Electronic Signature of Signing Officer or Director Date