

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000426

FILED
Apr 26, 2005
Secretary of State

Entity Name: WELLHOUSE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

121 WEST FORSYTH STREET STE 200
JACKSONVILLE, FL 32202

New Principal Place of Business:

6015 MORROW ST E
SUITE 107
JACKSONVILLE, FL 32217

Current Mailing Address:

121 WEST FORSYTH STREET STE 200
JACKSONVILLE, FL 32202

New Mailing Address:

6015 MORROW ST E
SUITE 107
JACKSONVILLE, FL 32217

FEI Number: 04-3594987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKSHIRE, GEORGE S
121 WEST FORSYTH STREET STE 200
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

BANNING MANAGEMENT INC
6015 MORROW ST E
SUITE 107
JACKSONVILLE, FL 32217 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: BANNING MANAGEMENT INC

04/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROOKSHIRE, GEORGE S
Address: 121 WEST FORSYTH STREET STE 200
City-St-Zip: JACKSONVILLE, FL 32202

Title: VD () Delete
Name: SMTIH, D BRIAN
Address: 121 WEST FORSYTH STREET STE 200
City-St-Zip: JACKSONVILLE, FL 32202

Title: VSTD () Delete
Name: SMART, NANCY
Address: 121 WEST FORSYTH STREET STE 200
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CASH, SHELDON
Address: 10239 WELLHOUSE COURT
City-St-Zip: JACKSONVILLE, FL 32220

Title: VD (X) Change () Addition
Name: BUCHANAN, JOSEPH
Address: 10237 JOHNNA KAY
City-St-Zip: JACKSONVILLE, FL 32220

Title: STD (X) Change () Addition
Name: GRAY, DANNIE
Address: 10226 SARAH FRANCES LANE
City-St-Zip: JACKSONVILLE, FL 32220

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: SHELDON CASH

PD

04/26/2005

Electronic Signature of Signing Officer or Director

Date