

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001756

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: NEWPORT UNIT THREE HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

3983 CLEARWATER LANE  
JACKSONVILLE, FL 32223

## New Principal Place of Business:

4540 SOUTHSIDE BLVD.  
202  
JACKSONVILLE, FL 32216

## Current Mailing Address:

3983 CLEARWATER LANE  
JACKSONVILLE, FL 32223

## New Mailing Address:

4540 SOUTHSIDE BLVD.  
202  
JACKSONVILLE, FL 32216

FEI Number: 55-0827447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEE, DALLAS  
3983 CLEARWATER LANE  
JACKSONVILLE, FL 32223 US

## Name and Address of New Registered Agent:

LAYTON, GLENN R  
4540 SOUTHSIDE BLVD.  
202  
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: GLENN R. LAYTON

04/29/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete  
Name: LEE, DALLAS  
Address: 3938 CLEARWATER LANE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: PS ( ) Delete  
Name: TREVETT, HARRY  
Address: 3938 CLEARWATER LANE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP (X) Delete  
Name: LEE, CANDACE  
Address: 3938 CLEARWATER LANE  
City-St-Zip: JACKSONVILLE, FL 32223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: LAYTON, GLENN R  
Address: 4540 SOUTHSIDE BLVD., SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPST (X) Change ( ) Addition  
Name: WILSON, CORI  
Address: 4540 SOUTHSIDE BLVD., SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32216

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GLENN R. LAYTON

DP

04/29/2005

Electronic Signature of Signing Officer or Director

Date