2005 NOT-FOR-PROFIT CORPORATION

Apr 22, 2005 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # N03000002478** 04-22-2005 90315 046 ****61.25 1. Entity Name PANTHER CREEK HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 920 3RD ST. 920 3RD ST. 50043005 STE. B STE. B NEPTUNE BEACH, FL 32266 NEPTUNE BEACH, FL 32266 03182005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0641028 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WALLACE, L. DENISE DO NOT WRITE 920 3RD ST. STE. B IN THIS SPACE NEPTUNE BEACH, FL 32266 8. 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. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee Is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10. TITLE OD NAME CURLEY, R. KENT STREET ADDRESS 5367 ORTEGA BOULEVARD CITY-ST-ZIP JACKSONVILLE, FL 32210 TITLE OD NAME BOYD, WILLIAM E STREET ADDRESS 5367 ORTEGA BOULEVARD CITY-\$T-ZIP JACKSONVILLE, FL 32210 TITLE BOYD, CHARLES T III------NAME STREET ADDRESS 5367 ORTEGA BOULEVARD DO NOT WRITE CITY-ST-ZIP JACKSONVILLE, FL 32210 TITLE

IN THIS SPACE

FILED

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CHARLES T. BOYD THE