2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004
Secretary of State

DOCUMENT# N03000006243

Entity Name: HONEYSUCKLE HILL OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2955 HARTLEY ROAD
SUITE 108
JACKSONVILLE, FL 32257

New Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097

Current Mailing Address:

2955 HARTLEY ROAD
SUITE 108
JACKSONVILLE, FL 32257

New Mailing Address:

P O BOX 1987
YULEE, FL 320411987

FEI Number: 54-2117642 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATOVINA, GREGORY E
2955 HARTLEY ROAD
SUITE 108
JACKSONVILLE, FL 32257

Name and Address of New Registered Agent:

POWELL, TERRELL J
463499 STATE ROAD 200
YULEE, FL 32097

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: TERRELL J POWELL 04/22/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GORIA, ANTHONY J
Address: 2955 HARTLEY ROAD #108
City-St-Zip: JACKSONVILLE, FL 32257

Title: VTD ( ) Delete
Name: MATOVINA, GREGORY E
Address: 2955 HARTLEY ROAD #108
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD ( ) Delete
Name: HUDSON, SHARON
Address: 2955 HARTLEY ROAD #108
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANTHONY J GORIA PD 04/22/2004
Electronic Signature of Signing Officer or Director Date