

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2007 8:00 am
Secretary of State

02-15-2007 90035 039 ****61.25

DOCUMENT # N03000007222 1. Entity Name RUSHING BRANCH HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 463499 STATE ROAD 200 YULEE, FL 32097			Mailing Address P.O. BOX 1987 YULEE, FL 32041-1987 US		
2. Principal Place of Business - No P.O. Box # 11555 Central Parkway Suite, Apt. #, etc. Suite 1103 City & State Jacksonville, FL Zip 32224			3. Mailing Address 11555 Central Parkway Suite, Apt. #, etc. Suite 1103 City & State Jacksonville, FL Zip 32224		
Country USA			Country USA		
6. Name and Address of Current Registered Agent PROPERTY MANAGEMENT SYSTEMS, INC. 463499 STATE ROAD 200 YULEE, FL 32097			7. Name and Address of New Registered Agent Name First Coast Association Management, LLC Street Address (P.O. Box Number is Not Acceptable) 11555 Central Parkway Suite Suite 1103 City Jacksonville		
State FL			Zip Code 32224		
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. SIGNATURE <u>Margaret Storey</u> Margaret Storey, CFO <u>2/7/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SPEIGEL, JOHN <input checked="" type="checkbox"/> Delete 505 PLAZA CIRCLE, #206 ORANGE PARK, FL 32073		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Miguel Ruiz 3131 Double Oaks Dr. Jacksonville, FL 32226	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP <input checked="" type="checkbox"/> Delete MORGANTI, ROBERT 505 PLAZA CIRCLE, #206 ORANGE PARK, FL 32073		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michael Farnham 3161 Double Oaks Drive Jacksonville, FL 32226	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input checked="" type="checkbox"/> Delete NORRIS, REGINA M 505 PLAZA CIRCLE, #206 ORANGE PARK, FL 32073		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec./Treas. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Commander Moore 3156 Double Oaks Dr. Jacksonville, FL 32226	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Margaret Storey</u> Margaret Storey <u>2/7/07</u> <u>904-998-5365</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #</small>					

ATTACHMENT 40017512

#163000007222

**RUSHING BRANCH HOMEOWNERS ASSOCIATION
BOARD OF DIRECTORS**

Miguel Ruiz

President

3131 Double Oaks Dr.
Jacksonville, FL 32226
Home: 904-757-8824
Miguel.ruiz@crowley.com

Michael Farnham

Vice President

3161 Double Oaks Drive
Jacksonville, FL 32226
Home: 904-714-4364
Cell: 904-477-8808
Work: 912-882-2295
Fax: 912-576-3184
michael_farnham@hotmail.com

Commander Moore

Secretary/Treasurer

3156 Double Oaks Dr.
Jacksonville, FL 32226
Home: 904-696-3245
commandermoore@bellsouth.net

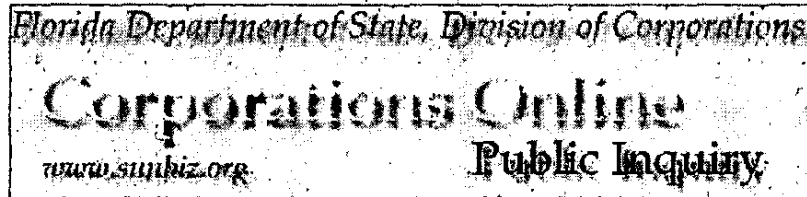
Community Association Management Representatives

First Coast Association Management
11555 Central Parkway, Suite 1103
Jacksonville FL 32224
(904) 998-5365

Alice Hubbard, CAM
Cell: (904) 219-9416
alice@firstcoastam.com

Jerry Philpot, CAM
Cell: (904) 233-2988
jerry@firstcoastam.com

H0017512



Florida Non Profit

RUSHING BRANCH HOMEOWNERS ASSOCIATION, INC.

PRINCIPAL ADDRESS

463499 STATE ROAD 200
YULEE FL 32097
Changed 09/26/2005

MAILING ADDRESS

P O BOX 1987
YULEE FL 32041-1987 US
Changed 09/26/2005

Document Number
N03000007222

FEI Number
562416521

Date Filed
08/22/2003

State
FL

Status
ACTIVE

Effective Date
NONE

Registered Agent

Name & Address
PROPERTY MANGEMENT SYSTEMS, INC. 463499 STATE ROAD 200 YULEE FL 32097
Name Changed: 04/26/2006
Address Changed: 09/26/2005

Officer/Director Detail

Name & Address	Title
SPEIGEL, JOHN 505 PLAZA CIRCLE, #206 ORANGE PARK FL 32073	DP
MORGANTI, ROBERT 505 PLAZA CIRCLE, #206 ORANGE PARK FL 32073	DVP
NORRIS, REGINA M 505 PLAZA CIRCLE, #206	

ATTACHMENT
40017512
#163000087222

ORANGE PARK FL 32073	DST
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Annual Reports

Report Year	Filed Date
2005	09/26/2005
2005	11/29/2005
2006	04/26/2006

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No Events

No Name History Information

Document Images

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[04/27/2005 -- ANNUAL REPORT](#)
[05/13/2004 -- ANN REP/UNIFORM BUS REP](#)
[08/22/2003 -- Domestic Non-Profit](#)

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