

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007983

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: EMERALD ESTATES OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

1200 RIVERPLACE BLVD STE 902  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

3750 SILVER BLUFF BLVD  
#603  
ORANGE PARK, FL 32065 US

## Current Mailing Address:

501 RIVERSIDE AVE, SUITE 902  
JACKSONVILLE, FL 32202

## New Mailing Address:

3750 SILVER BLUFF BLVD  
#603  
ORANGE PARK, FL 32065 US

FEI Number: 75-3153304

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, BRIAN E  
1200 RIVERPLACE BLVD STE 902  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

MCNAIR, WALTER C  
3750 SILVER BLUFF BLVD  
#603  
JACKSONVILLE, FL 32065 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: WALTER C. MCNAIR

04/24/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BROWN, BRIAN E  
Address: 1200 RIVERPLACE BLVD STE 902  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: SMITH, R LEE  
Address: 1200 RIVERPLACE BLVD STE 902  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Delete  
Name: STUTSMAN, BRUCE E  
Address: 1200 RIVERPLACE BLVD STE 902  
City-St-Zip: JACKSONVILLE, FL 32207

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCNAIR, WALTER C  
Address: 3750 SILVER BLUFF BLVD #603  
City-St-Zip: ORANGE PARK, FL 32065

Title: V (X) Change ( ) Addition  
Name: OLIVER, TAMMY  
Address: 10761 LAS COLINAS WAY  
City-St-Zip: JACKSONVILLE, FL 32222

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WALTER C. MCNAIR

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date