

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008610

FILED  
Mar 08, 2009  
Secretary of State

Entity Name: JARDIN CONDOMINIUM ASSOCIATION IV, INC.

**Current Principal Place of Business:**

125 JARDIN DE MER PLACE  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 51322  
JACKSONVILLE BEACH, FL 32240

**New Mailing Address:**

FEI Number: 20-1225619      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARTER-SHERMAN MANAGEMENT, LLC  
125 JARDIN DE MER PLACE  
JACKSONVILLE BEACH, FL 32250      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PDTD ( ) Delete  
Name: ORSINI, RICHARD  
Address: 68 JARDIN DE MER PL  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete  
Name: WILLIAMS, KAREN  
Address: 65 JARDIN DE MER PL  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ORSINI, RICHARD  
Address: 68 JARDIN DE MER PL  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VPD (X) Change ( ) Addition  
Name: WILLIAMS, KAREN  
Address: 65 JARDIN DE MER PL  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: STD ( ) Change (X) Addition  
Name: COLLINS, LORI  
Address: 67 JARDIN DE MER PLACE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: TERI CARTER

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

RA

03/08/2009

\_\_\_\_\_ Date