

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 30, 2006**  
**Secretary of State**

DOCUMENT# N03000008655

**Entity Name:** DAYBREAK WOODS PHASE II HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**P. O. BOX 26344  
JACKSONVILLE, FL 32226**New Principal Place of Business:****Current Mailing Address:**P. O. BOX 26344  
JACKSONVILLE, FL 32226**New Mailing Address:****FEI Number:** 20-3469441**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LOPEZ, JOHN J PRES.  
12696 DAYLIGHT TRAIL  
SUITE 2  
JACKSONVILLE, FL 32218 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: FVP ( ) Delete  
Name: BALBOAL, SALAH FVP  
Address: 1224 DAWNLIGHT RD  
City-St-Zip: JACKSONVILLE, FL 32218Title: TRES ( ) Delete  
Name: JOHNSON, GLENN TRES.  
Address: 1259 SUNRAY CT  
City-St-Zip: JACKSONVILLE, FL 32218Title: SEC ( ) Delete  
Name: PARISEAU, AIMEE SEC  
Address: 1107 DAWNLIGHT RD  
City-St-Zip: JACKSONVILLE, FL 32218Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**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:Title: PRES ( ) Change (X) Addition  
Name: LOPEZ, JOHN J  
Address: 12696 DAYLIGHT TRAIL  
City-St-Zip: JACKSONVILLE, FL 32218Title: DIR ( ) Change (X) Addition  
Name: TURNER, DENNIS R  
Address: 12648 DAYLIGHT TRAIL  
City-St-Zip: JACKSONVILLE, FL 32218

I hereby certify that the information supplied with this filing does not qualify for the 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: GLENN JOHNSON

TRES

06/30/2006

Electronic Signature of Signing Officer or Director

Date