

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009301

FILED
May 06, 2007
Secretary of State

Entity Name: GREATER HOOD ROAD COMMUNITY ASSOCIATION INC.

Current Principal Place of Business:

5608 BLUE PACIFIC DR.
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

5608 BLUE PACIFIC DR.
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 20-0393823 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HILL, JAMES E
5608 BLUE PACIFIC DRIVE
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

TERBRUEGGEN, MARI F
9745 HOOD ROAD
JACKSONVILLE, FL 32257 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: MARI TERBRUEGGEN

05/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HILL, JAMES
Address: 5608 BLUE PACIFIC DR.
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD () Delete
Name: TERBRUEGGEN, MARI
Address: 9745 HOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: STD () Delete
Name: TERBRUEGGEN, MELISSA
Address: 9745 HOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: () 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: STD (X) Change () Addition
Name: BURNAKIS, THOMAS
Address: 9745 HOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: STD () Change (X) Addition
Name: MEARA, GEORGE
Address: 9745 HOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: STD () Change (X) Addition
Name: JOHNSON, DEBORAH
Address: 9745 HOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32257

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: MARI TERBRUEGGEN

VP

05/06/2007

Electronic Signature of Signing Officer or Director

Date