

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000747

FILED
Apr 26, 2006
Secretary of State

Entity Name: LONGLEAF PLANTATION OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

920 THRID ST STE B
NEPTUNE BCH, FL 32266

New Principal Place of Business:

920 THRID ST
STE B
NEPTUNE BCH, FL 32266 US

Current Mailing Address:

920 THRID ST STE B
NEPTUNE BCH, FL 32266

New Mailing Address:

920 THRID ST
STE B
NEPTUNE BCH, FL 32266 US

FEI Number: 04-3794467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, L. DENISE
920 THIRD ST STE B
NEPTUNE BCH, FL 32266 US

Name and Address of New Registered Agent:

WALLACE, L. DENISE
920 THIRD ST
STE B
NEPTUNE BCH, FL 32266 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:

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KNOWLES, MARK A
Address: 3840 CROWN PT RD STE A
City-St-Zip: JACKSONVILLE, FL 32257

Title: DV () Delete
Name: HOLLAND, BEVERLY J
Address: 3840 CROWN PT RD STE A
City-St-Zip: JACKSONVILLE, FL 32257

Title: DST () Delete
Name: WALLACE, L. DENISE
Address: 920 THRID ST STE B
City-St-Zip: NEPTUNE BCH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KNOWLES, MARK A
Address: 3840 CROWN PT RD STE A
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: DV (X) Change () Addition
Name: HOLLAND, BEVERLY J
Address: 3840 CROWN PT RD STE A
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: DST (X) Change () Addition
Name: WALLACE, L. DENISE
Address: 920 THRID ST STE B
City-St-Zip: NEPTUNE BCH, FL 32266 US

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: MARK KNOWLES

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date