2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000008667

FILED Jun 15, 2010 Secretary of State

Entity Name: NORTH CAMPUS OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1712 KINGSLEY AV 12058 SAN JOSE BLVD.

SUITE 904 STE 2

ORANGE PARK, FL 32073 JACKSONVILLE, FL 32223

New Mailing Address: Current Mailing Address:

PO BOX 65908 P.O. BOX 600033

ORANGE PARK, FL 32065 US JACKSONVILLE, FL 32260 US

FEI Number: 20-1546798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COMPLETE ASSOCIATION MANAGEMENT, INC. PROPERTY MANAGEMENT PARTNERS OF ST. JOHNS

12058 SAN JOSE BLVD. 1712 KINGSLEY AV

STE 2 SUITE 904 ORANGE PARK, FL 32073 US JACKSONVILLE, FL 32223 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: ELAINE BROOKS 06/15/2010 Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

CLEMENTS, KELLY Name: Address: P.O. BOX 600033 City-St-Zip: JACKSONVILLE, FL 32260

Title:

Name: GRANT, HATTIE Address: P.O. BOX 600033 City-St-Zip:

JACKSONVILLE, FL 32260

Title:

THOMPSON, RUSS Name: Address: P.O. BOX 600033 City-St-Zip: JACKSONVILLE, FL 32260

Title:

MIMS, DONNA Name: P.O. BOX 600033 Address:

City-St-Zip: JACKSONVILLE, FL 32260

Title:

HOSANG, BRIAN Name: P.O. BOX 600033 Address: JACKSONVILLE, FL 32260 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: KELLY CLEMENTS Ρ 06/15/2010