2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011492

Entity Name: CAMPFIELD OWNERS ASSOCIATION, INC.

FILED Apr 27, 2007 Secretary of State

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

2245 ST JOHNS AVE 8133 BAYMEADOWS WAY JACKSONVILLE, FL 32204 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

2245 ST JOHNS AVE
JACKSONVILLE, FL 32204

8133 BAYMEADOWS WAY
JACKSONVILLE, FL 32256

FEI Number: 20-1985035 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:

RAX CO. DAVIS, PATRICK R

3300 BANK OF AMERICA CENTER 50 N LAURA ST 8133 BAYMEADOWS WAY

JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32256 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: PATRICK R DAVIS 04/27/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

 Name:
 CANTRELL, HEYWARD M
 Name:
 DAVIS, PATRICK R

 Address:
 121 HOGAN ST.
 Address:
 8133 BAYMEADOWS WAY

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32256

Title: VTD () Delete Title: () Change () Addition

 Name:
 BAILET, PETER D
 Name:

 Address:
 3017 OAK ST.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32204
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name:BLACKARD, WILLIAM R JR.Name:GENOVESE, BİLLAddress:2468 ATLANTIC BLVD.Address:8133 BAYMEADOWS WAYCity-St-Zip:JACKSONVILLE, FL 32207City-St-Zip:JACKSONVILLE, FL 32256

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: PATRICK R DAVIS PD 04/27/2007