

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003811

FILED
Mar 25, 2008
Secretary of State

Entity Name: BRIAR OAK AT OAKLEAF PLANTATION TOWNHOMES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5151 ADANSON STREET
SUITE 103
ORLANDO, FL 32804

New Principal Place of Business:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224

Current Mailing Address:

5151 ADANSON STREET
SUITE 103
ORLANDO, FL 32804

New Mailing Address:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224

FEI Number: 20-3678751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUSE, GARY
C/O PREMIER COMMUNITY MANAGERS, INC.
5151 ADANSON STREET, SUITE 103
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT, LLC
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 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: MARGARET STOREY, CFO

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: REY, DAVID
Address: 101 EAST TOWN PLACE SUITE 700 ST.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: DVP () Delete
Name: RADCLIFF, JENNIFER
Address: 101 EAST TOWN PLACE SUITE 700 ST.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: DST () Delete
Name: PENROD, CHRIS
Address: 101 EAST TOWN PLACE SUITE 700 ST.
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: REY, DAVID
Address: 101 EAST TOWN PLACE, SUITE 700
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VP (X) Change () Addition
Name: RADCLIFF, JENNIFER
Address: 101 EAST TOWN PLACE, SUITE 700
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: SEC (X) Change () Addition
Name: PENROD, CHRIS
Address: 101 EAST TOWN PLACE, SUITE 700
City-St-Zip: ST. AUGUSTINE, FL 32092

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: MARGARET STOREY

CFO

03/25/2008

Electronic Signature of Signing Officer or Director

Date