

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003989

FILED  
Feb 03, 2010  
Secretary of State

**Entity Name:** PARADISE MOORINGS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

475 WEST TOWN PLACE  
SUITE 112  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

5455 A1A SOUTH  
SUITE 3  
ST. AUGUSTINE, FL 32080

**New Mailing Address:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256

**FEI Number:** 20-4645547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAY MANAGEMENT SERVICES, INC.  
5455 A1A SOUTH  
SUITE 3  
ST. AUGUSTINE, FL 32080 US

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

COMMUNITY MANAGEMENT CONCEPTS INC  
7400 BAYMEADOWS WAY  
SUITE 317  
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: SHERRILL SCHAFER

02/03/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CHRISTENSEN, DENNIS  
Address: 7400 BAYMEADOWS WAY, #317  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP  
Name: HARTING, DON  
Address: 7400 BAYMEADOWS WAY, #317  
City-St-Zip: JACKSONVILLE, FL 32256

Title: T  
Name: CRISSINGER, SAMUEL  
Address: 7400 BAYMEADOWS WAY, #317  
City-St-Zip: JACKSONVILLE, FL 32256

Title: S  
Name: MORKEN, GREG  
Address: 7400 BAYMEADOWS WAY, #317  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D  
Name: BUCK, RUSSELL  
Address: 7400 BAYMEADOWS WAY, #317  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D  
Name: SPEER, RALPH  
Address: 7400 BAYMEADOWS WAY, #317  
City-St-Zip: JACKSONVILLE, FL 32256

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: DENNIS CHRISTENSEN

PRES

02/03/2010

Electronic Signature of Signing Officer or Director

Date