

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004990

FILED
Apr 08, 2009
Secretary of State

Entity Name: OFFICES AT JOHNS CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12740 ATLANTIC BLVD - STE 7
JACKSONVILLE, FL 32224

New Principal Place of Business:

12740 ATLANTIC BLVD - STE 7
JACKSONVILLE, FL 32225

Current Mailing Address:

12740 ATLANTIC BLVD - STE 7
JACKSONVILLE, FL 32224

New Mailing Address:

12740 ATLANTIC BLVD - STE 7
JACKSONVILLE, FL 32225

FEI Number: 20-3639519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLEM, SCOTT
12740 ATLANTIC BLVD - STE 7
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

SOLEM, SCOTT R
12740 ATLANTIC BLVD - STE 7
JACKSONVILLE, FL 32225 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: SCOTT R. SOLEM

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: SOLEM, SCOTT R
Address: 12740 ATLANTIC BLVD - STE 7
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: JACALONE, MARC A
Address: 516 OLD GOVERNOR WAY
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D () Delete
Name: CHERRY, BRADLEY A
Address: 1601 OCEAN DRIVE SOUTH APT. 505
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: IANNONE, ANTHONY
Address: 113 NATURE WALK PKWY., STE.101
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: SOLEM, SCOTT R
Address: 12740 ATLANTIC BLVD - STE 7
City-St-Zip: JACKSONVILLE, FL 32225

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SCOTT R. SOLEM

PST

04/08/2009

Electronic Signature of Signing Officer or Director

Date