2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State 04-30-2008 90195 028 ****70.00

DOCUMENT # N0500 1. Entity Name RUSHING BRANCH UNIT II H ASSOCIATION, INC.		
Principal Place of Business 3101 ASHGROVE ROAD JACKSONVILLE, FL 32226	Mailing Address P 0 BOX 65908 ORANGE PARK, FL 32065	US

	ATION, INC.	JVVINERS					
3101 ASHGF	ce of Business ROVE ROAD LE, FL 32226	Mailing Address P 0 B0X 65908 ORANGE PARK, FL 3206	65 US		6003404'		
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04172008 Ch	ng-NP CR	2E037 (12/06)	•
City & Stat	te	City & State		4. FEI Number 20-381292	1	Applied Not Ap	d For plicable
Zip	Country	Zip	Country	5. Certificate of Sta		\$8.75 Addition Fee Required	nal
	6. Name and Address of Curren	t Registered Agent		7. Name and Add	ress of New Registe	red Agent	
COMPLET	TE ASSOCIATION MANNACEN	FENT INC	Name				
125A INDI	TE ASSOCIATION MANAGEN USTRIAL LOOP WEST PARK, FL 32065	BENT, INC.	Street Addre	ess (P.O. Box Number is N	Not Acceptable)		
			City			FL Zip Code	
	e named entity submits this statement tions of registered agent.	or the purpose of changing its re	egistered office or regi	istered agent, or both, in	the State of Florida.	am familiar with, and	accept
SIGNATURE	Signature, typed or printed name of registered ager						
Ĺ <u></u> -	Signature, typed or primed name of registered ager	nt and title if applicable. (NOTE:	Hegistered Agent signature rec	quired when reinstating)	D.	ATE	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make c	heck payable to epartment of State	
10.	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be	Make c Florida De	heck payable to epartment of State	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 expected this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all enter like emplowered.

SIGNATURE