

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006546

FILED
Jan 05, 2011
Secretary of State

Entity Name: TWIN LAKES HOMEOWNER'S ASSOCIATION OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

780 N. PONCE DE LEON BOULEVARD
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

POST OFFICE DRAWER 3007
SAINT AUGUSTINE, FL 32085

New Mailing Address:

10000 GATE PARKWAY NORTH
926
JACKSONVILLE, FL 32246

FEI Number: 56-2574677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, JOHN D JR.
780 N. PONCE DE LEON BOULEVARD
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

SESSIONS REALTY
10000 GATE PARKWAY N
926
JACKSONVILLE, FL 32246 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: SESSIONS REALTY

01/05/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D/P
Name: DIRMYER, ROBERT W
Address: 100 SOUTHPARK BOULEVARD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: DVPT
Name: HORTON, JAMES W JR.
Address: 100 SOUTHPARK BOULEVARD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D/S
Name: BAILEY, JOHN D JR.
Address: 780 N. PONCE DE LEON BOULEVARD
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: CATHERINE KINCAID

MRS.

01/05/2011

Electronic Signature of Signing Officer or Director

Date