2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007026

Apr 27, 2010 Secretary of State

Entity Name: TAPESTRY PARK JACKSONVILLE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10036 SAWGRASS DR W 200 W. FORSYTH ST.

SUITE 1 SUITE 400

PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE, FL 32202 US

Current Mailing Address: New Mailing Address:

5455 AIA SOUTH 200 W. FORSYTH ST.

SUITE 3 SUITE 400

ST. AUGUSTINE, FL 32080 US JACKSONVILLE, FL 32202 US

FEI Number: 26-3936698 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MAY MANAGEMENT SERVICES, INC
5445 AIA SOUTH
SUITE 3

CANTRELL & MORGAN, INC.
200 WEST FORSYTH STREET
SUITE 400

ST. AUGUSTINE, FL 32080 US JACKSONVILLE, FL 32202 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: CHRIS MORGAN 04/27/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: DIXON, JAMES

Address: 200 W. FORSYTH ST., STE. 400 City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP

Name: SNIDER, AMBER L

Address: 200 W. FORSYTH ST., STE. 400 City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S/T

Name: GRAEVE, KENT

Address: 200 W. FORSYTH ST., STE. 400 City-St-Zip: JACKSONVILLE, FL 32202 US

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: JAMES DIXON P 04/27/2010