

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007631

FILED  
Jul 31, 2007  
Secretary of State

**Entity Name:** TAYLORFIELD PROPERTIES SUBDIVISION HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

2002 SOUTHSIDE BLVD - STE 100E  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

2016 IMESON ROAD  
JACKSONVILLE, FL 32220

**Current Mailing Address:**

2002 SOUTHSIDE BLVD - STE 100E  
JACKSONVILLE, FL 32216

**New Mailing Address:**

2016 IMESON ROAD  
JACKSONVILLE, FL 32220

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DOYLE, WILLIAM E  
2002 SOUTHSIDE BLVD  
STE 201  
JACKSONVILLE, FL 32216 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: STARKE, STEPHEN M  
Address: 2002 SOUTHSIDE BLVD - STE 100E  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: STARKE, STEPHEN M  
Address: 2002 SOUTHSIDE BLVD - STE 100E  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPS ( ) Delete  
Name: COFFIELD, HAROLD W  
Address: 2743 ANNISTON DR  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete  
Name: COFFIELD, HAROLD W  
Address: 2743 ANNISTON DR  
City-St-Zip: JACKSONVILLE, FL 32246

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: STARKE, STEPHEN M  
Address: 2016 IMESON ROAD  
City-St-Zip: JACKSONVILLE, FL 32220

Title: D (X) Change ( ) Addition  
Name: STARKE, STEPHEN M  
Address: 2016 IMESON ROAD  
City-St-Zip: JACKSONVILLE, FL 32220

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: STEPHEN M. STARKE

PT

07/31/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date