2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008
Secretary of State

DOCUMENT# N05000007631

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

Current Principal Place of Business:

2016 IMESON ROAD
JACKSONVILLE, FL 32220

New Principal Place of Business:

Current Mailing Address:

2016 IMESON ROAD
JACKSONVILLE, FL 32220

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DOYLE, WILLIAM E
2002 SOUTHSIDE BLVD
STE 201
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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: 2016 IMESON ROAD
City-St-Zip: JACKSONVILLE, FL 32220

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

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

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: STEPHEN STARKE PD 01/17/2008

Electronic Signature of Signing Officer or Director — Date