


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N05000008209</b> 1. Entity Name <b>DAWSON'S CREEK HOMEOWNERS ASSOCIATION OF JACKSONVILLE, INC.</b>	
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Principal Place of Business <b>233 E BAY ST 1010 THE BLACKSTONE BLD JACKSONVILLE, FL 32202</b>	Mailing Address <b>233 E BAY ST 1010 THE BLACKSTONE BLD JACKSONVILLE, FL 32202</b>
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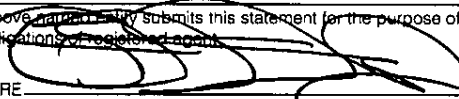


01292008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>76-0824491</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>DAWSON, CARL D JR. 233 E BAY ST 1010 THE BLACKSTONE BLD JACKSONVILLE, FL 32202</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE  <b>CARL DAWSON JR</b> <b>12908</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>DAWSON, CARL D JR 233 E BAY ST 1010 THE BLACKSTONE BLD JACKSONVILLE, FL 32202</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <b>COLLEDGE, SHEPHERD B 233 E BAY ST 1010 THE BLACKSTONE BLD JACKSONVILLE, FL 32202</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <b>HOWELL, WILLIAM R II 233 E BAY ST 1010 THE BLACKSTONE BLD JACKSONVILLE, FL 32202</b>
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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 execute 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 other like empowered.
<b>SIGNATURE:</b>  <b>12908</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>
Date <b>904 355509</b> <small>Daytime Phone #</small>