2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011048

FILED Feb 04, 2009 Secretary of State

Entity Name: AUGUSTINE OAKS OFFICE CENTER OWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 9191 R G SKINNER PARKWAY SUITE 503 JACKSONVILLE, FL 32256 **New Mailing Address: Current Mailing Address:** 9191 R G SKINNER PARKWAY SUITE 503 JACKSONVILLE, FL 32256 FEI Number: 02-0767792 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: CRABTREE, R. R. 8777 SAN JÓSE BLVD BLDG A, SUITE 200 JACKSONVILLE, FL 32217 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GILES, RICK Name: Name: Address: 9191 R G SKINNER PARKWAY, SUITE 503 Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: STRICKLAND, CHRIS Name: Address: 9191 R G SKINNER PARKWAY, SUITE 503 Address: City-St-Zip: JACKSONVILLE, FL 32256 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: RICK GILES DP 02/04/2009