2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011048

FILED Mar 09, 2011 Secretary of State

Entity Name: AUGUSTINE OAKS OFFICE CENTER OWNERS ASSOCIATION, INC.

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

11481 OLD ST AUGUSTINE ROAD SUITE 104 JACKSONVILLE, FL 32258

Current Mailing Address: New Mailing Address:

P O BOX 330052 ATLANTIC BEACH, FL 32233

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:

BREITBART, JERRE 2279 SEMINOLE RD #6 ATLANTIC BEACH, FL FL32233 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: D

Name: BREITBART, JERRE
Address: 2279 SEMINOLE RD #6
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: PD

Name: CENTRELLA, JASON

Address: 11481 OLD ST AUGUSTINE ROAD STE 104

City-St-Zip: JACKSONVILLE, FL 32258

Title: DS

Name: BLACKFORD, STEVE

Address: 11481 OLD ST AUGUSTINE ROAD STE 104

City-St-Zip: JACKSONVILLE, FL 32258

Title: DVP

Name: GILES, RICK

Address: 11481 OLD ST AUGUSTINE ROAD STE 104

City-St-Zip: JACKSONVILLE, FL 32258

Title: DT

Name: HAAS, RANDALL

Address: 11481 OLD ST AUGUSTINE ROAD STE 104

City-St-Zip: JACKSONVILLE, FL 32258

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: JASON CENTRELLA PRES 03/09/2011