

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05892

FILED  
Apr 19, 2007  
Secretary of State

Entity Name: SHADY COVE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

6015 MORROW ST., E., SUITE 107  
JACKSONVILLE, FL 32217

## New Principal Place of Business:

4213 COUNTY ROAD 218  
SUITE 1  
MIDDLEBURG, FL 32068

## Current Mailing Address:

6015 MORROW ST E  
STE 107  
JACKSONVILLE, FL 32217 US

## New Mailing Address:

4213 COUNTY ROAD 218  
SUITE 1  
MIDDLEBURG, FL 32068 US

FEI Number: 59-2461353

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BANNING MANAGEMENT INC  
6015 MORROW ST. E., SUITE 107  
JACKSONVILLE, FL 32217 US

## Name and Address of New Registered Agent:

AWAKENINGS ASSOCIATION MANAGEMENT, INC  
4213 COUNTY ROAD  
SUITE 1  
MIDDLEBURG, FL 32068 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: VINA C DELCOMYN

04/19/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: JURKOVAC, RICK,  
Address: 4757 ATLANTA CT  
City-St-Zip: JACKSONVILLE, FL

Title: SD ( ) Delete  
Name: WILKINS, EUGENE  
Address: 5568 LA MOYA AVE., #16B  
City-St-Zip: JACKSONVILLE, FL 32210

Title: PD ( ) Delete  
Name: CRUCE, ROGER  
Address: 2780 ADMINRALS WALK DR E  
City-St-Zip: ORANGE PARK, FL 32073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JURKOVAC, RICK,  
Address: 4757 ATLANTA CT  
City-St-Zip: JACKSONVILLE, FL

Title: SD (X) Change ( ) Addition  
Name: NACKINO, BONNIE  
Address: 5568 LA MOYA AVE., #8A  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VPD (X) Change ( ) Addition  
Name: EUGENE, WILKINS  
Address: 5568 LA MOYA AVENUE #16B  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the 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 JURKOVAC

PRES

04/19/2007

Electronic Signature of Signing Officer or Director

Date