## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N06000005174

FILED Nov 17, 2008 Secretary of State

Entity Name: HERON'S LANDING CONDOMINIUM ASSOCIATION OF JACKSONVILLE, INC.

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

9456 PHILIPS HIGHWAY, STE. 1 JACKSONVILLE, FL 32256

**Current Mailing Address: New Mailing Address:** 

5455 A1A S

SAINT AUGUSTINE, FL 32080 US

FEI Number: 20-5404444 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:

MAY MANAGEMENT SERVICES, INC. ANNA MARKS, AGENT 5455 A1A SOUTH ST. AUGUSTINE, FL 32080 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

ZAKOSKE, JOHN Name: Name: 9456 PHILIPS HIGHWAY, STE. 1 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip:

Title: DVP () Delete Title: (X) Change ( ) Addition

DEARING, MARK C. Name: DEARING, MARK C Name:

Address: 9456 PHILIPS HIGHWAY, STE, 1 Address: 9456 PHILIPS HIGHWAY, STE, 1 City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

Title: () Delete Title: (X) Change ( ) Addition

RESTALL, SHELBY DEARING, MARK C Name: Name: 9456 PHILIPS HIGHWAY, SUITE 1 Address: Address: 9456 PHILIPS HIGHWAY, SUITE 1

City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

Title: DAST () Delete Title: DVP (X) Change ( ) Addition

Name: KNOX, LINNETTE C Name: FOREST, BARBARA 9456 PHILIPS HIGHWAY, SUITE 1 13811 HERONS LANDING WAY, UNIT #1 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32224 US

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: MARK C. DEARING, VICE PRESIDENT **VP** 11/17/2008