

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006704

FILED  
Mar 31, 2010  
Secretary of State

**Entity Name:** OLD TOWN VILLAGES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7645 GATE PARKWAY  
SUITE 202  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

2083 STATE ROAD 16  
ST AUGUSTINE, FL 32084

**Current Mailing Address:**

7645 GATE PARKWAY  
SUITE 202  
JACKSONVILLE, FL 32256

**New Mailing Address:**

**FEI Number:** 20-5091359

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HORIZON REALTY MANAGEMENT INC  
7645 GATE PARKWAY  
SUITE 202  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

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: JACQUOT, JERRY  
Address: 7645 GATE PARKWAY SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32256

Title: PD  
Name: GALLAGHER, BRENDA  
Address: 7645 GATE PARKWAY SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32256

Title: TRS  
Name: SHAY, KELLY  
Address: 7645 GATE PARKWAY SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32256

Title: SC  
Name: HORNBUCKLE, BOB  
Address: 7645 GATE PARKWAY SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32256

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: MIKE KAZMIERSKI

MGR

03/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date