

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009522

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** THE COTTAGES AT ARGYLE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3020 HARTLEY ROAD  
SUITE 310  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

11555 CENTRAL PARKWAY  
STE 801  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

C/O PATRIOT RESIDENTIAL MANAGEMENT SERVICE  
3020 HARTLEY ROAD, SUITE 310  
JACKSONVILLE, FL 32257

**New Mailing Address:**

11555 CENTRAL PARKWAY  
STE 801  
JACKSONVILLE, FL 32224

**FEI Number:** 20-5528414

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATRIOT RESIDENTIAL MANAGEMENT SERVICES  
3020 HARTLEY RD  
310  
JACKSONVILLE, FL 32257 US

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

FIRST COAST ASSOCIATION MANAGEMENT  
11555 CENTRAL PARKWAY  
STE 801  
JACKSONVILLE, FL 32224 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: ALICE HUBBARD

02/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: DAVENPORT, CHRISTINE  
Address: 11555 CENTRAL PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: PRES  
Name: NORMAN, JOHN  
Address: 11555 CENTRAL PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: TREA  
Name: MCDOWELL, TIM  
Address: 11555 CENTRAL PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: DIR  
Name: LAWRENCE, JOHN  
Address: 11555 CENTRAL PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: DIR  
Name: GREATHOUSE, DONNA  
Address: 11555 CENTRAL PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32224

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: JOHN NORMAN

PRES

02/24/2012

Electronic Signature of Signing Officer or Director

Date