2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010210

FILED Mar 26, 2009 Secretary of State

Entity Name: HERITAGE OAKS OWNERS' ASSOCIATION, INC.

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

463499 STATE ROAD 200 8186 BAYMEADOWS WAY WEST YULEE, FL 32097 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

P O BOX 1987 YULEE, FL 32041 US 8186 BAYMEADOWS WAY WEST JACKSONVILLE, FL 32256

FEI Number: 20-5652517 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:

PROPERTY MANAGEMENT SYSTEMS INC
463499 STATE ROAD 200
YULEE, FL 320411987 US
G F FLORIDA HOMES, LLC
8186 BAYMEADOWS WAY WEST
JACKSONVILLE, FL 32256 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: CHRISTOPHER J. GAZES (MGR) 03/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 TOWERS, WILLIAM B III
 Name:
 GAZES, CHRISTOPHER J

 Address:
 6215 WILSON BLVD
 Address:
 16039 WEBB HAVEN RD

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 GLEN ST. MARY, FL 32040

Title: DVST () Delete Title: T (X) Change () Addition Name: TOWERS, ELIZABETH F Name: SMITH, JANET L

Address: 6215 WILSON BLVD Address: 1812 BOLTON ABBEY DRIVE
City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32223

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

 Name:
 Name:
 COLLEY, JOSEPH L

 Address:
 Address:
 8660 SPRINGTREE ROAD

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32210

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: CHRISTOPHER J. GAZES (DIRECTOR/PRES) DP 03/26/2009