2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010525

FILED Mar 17, 2009 Secretary of State

Entity Name: JACKSONVILLE RANCH CLUB TWO OWNERS ASWSOCIATION, INC.

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

9907 KINGS CROSSING DRIVE 9987 PRESERVES WAY JACKSONVILLE, FL 32219 JACKSONVILLE, FL 32219

Current Mailing Address: New Mailing Address:

9907 KINGS CROSSING DRIVE 9987 PRESERVES WAY JACKSONVILLE, FL 32219 9987 PRESERVES WAY

FEI Number: 20-8355219 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:

CLAYTON, TERRY
9907 KINGS CROSSING DRIVE
9987 PRESERVES WAY
JACKSONVILLE, FL 32219 US
JACKSONVILLE, FL 32219 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: 03/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 FORBES, JEFFRY
 Name:
 CLAYTON, TERRY

 Address:
 1724 DEL HAVEN DRIVE
 Address:
 9987 PRESERVES WAY

 City-St-Zip:
 DELRAY BEACH, FL 33483
 City-St-Zip:
 JACKSONVILLE, FL 32219

Title: DST () Delete Title: () Change () Addition

 Name:
 MACALPHINE, WILLIAM
 Name:

 Address:
 325 CORPORATE WAY STE 100
 Address:

 City-St-Zip:
 PORTSMOUTH, NH 03801
 City-St-Zip:

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

 Name:
 FORBES, CHRISTOPHER
 Name:

 Address:
 PO BOX 1500
 Address:

 City-St-Zip:
 WOODVILLE, FL 32362
 City-St-Zip:

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: WILLIAM MACALPINE DST 03/17/2009