

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010920

FILED
Mar 25, 2009
Secretary of State

Entity Name: JENNINGS POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2900 HARTLEY ROAD
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

2900 HARTLEY ROAD
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 20-8391924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STELLAR PROPERTIES
2900 HARTLEY RD
JACKSONVILLE, FL 32257 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: PD () Delete
Name: PEERY, JASON
Address: 12740 GRAN BAY PARKWAY #2400
City-St-Zip: JACKSONVILLE, FL 32258

Title: VD () Delete
Name: STELLER, DAN
Address: 12740 GRAN BAY PARKWAY #2400
City-St-Zip: JACKSONVILLE, FL 32258

Title: STD () Delete
Name: POLSENO, GINA
Address: 12740 GRAN BAY PARKWAY #2400
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AKIM, CURTISS
Address: 575 OAKLEAF PLANTATION PWKY #1008
City-St-Zip: ORANGE PARK, FL 32065

Title: VD (X) Change () Addition
Name: GRIFFIN, MIKE
Address: 575 OAKLEAF PLANTATION PWKY #706
City-St-Zip: ORANGE PARK, FL 32065

Title: STD (X) Change () Addition
Name: TUA, MICHELE
Address: 575 OAKLEAF PLANTATION PWKY #1303
City-St-Zip: ORANGE PARK, FL 32065

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: CURTISS AKIM

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date