

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 18, 2010**  
**Secretary of State**

DOCUMENT# N07000007385

**Entity Name:** THE COTTAGES AT WINDING CREEK CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3020 HARTLEY ROAD  
300  
JACKSONVILLE, FL 32257**New Principal Place of Business:**3020 HARTLEY ROAD  
310  
JACKSONVILLE, FL 32257**Current Mailing Address:**C/O JDR REAL ESTATE MANAGEMENT, INC.  
3020 HARTLEY ROAD, SUITE 300  
JACKSONVILLE, FL 32257**New Mailing Address:**C/O PATRIOT RESIDENTIAL MANAGEMENT SERVICE  
3020 HARTLEY ROAD, SUITE 310  
JACKSONVILLE, FL 32257**FEI Number:** 26-0591589**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DALE G. WESTLING, SR., P.A.  
331 E. UNION STREET  
JACKSONVILLE, FL 32202 US**Name and Address of New Registered Agent:**PATRIOT RESIDENTIAL MANAGEMENT SERVICES  
3020 HARTLEY ROAD  
310  
JACKSONVILLE, FL 32257 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: KAREN GOWEN

08/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SCHACHT, THOMAS J  
Address: 3020 HARTLEY ROAD, SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VSD  
Name: MORGAN, WILLIAM L  
Address: 3020 HARTLEY ROAD, SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD  
Name: MOORE, CLARENCE S  
Address: 3020 HARTLEY ROAD, SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D  
Name: BOUTIN, AUBREY B  
Address: 105 BAYBERRY CIRCLE, UNIT #401  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: D  
Name: CLARKSON, MARY E  
Address: 115 E. PINE HOLLOW TRAIL, UNIT #103  
City-St-Zip: ST. AUGUSTINE, FL 32086

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: KAREN GOWEN

LCAM

08/18/2010

Electronic Signature of Signing Officer or Director

Date