

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07565

FILED
Feb 13, 2009
Secretary of State

Entity Name: SAN JOSE LAKE CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

% CHARLES F. WINNEY
7598 OLD KINGS RD. S.
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

% CHARLES F. WINNEY
7598 OLD KINGS RD. S.
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-2647427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINNEY, CHARLES F. JR
7598 OLD KINGS ROAD S
JACKSONVILLE, FL 32217 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: P () Delete
Name: WINNEY, CHARLES F JR.
Address: 7598 OLD KINGS ROADS SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

Title: TST () Delete
Name: RASEY, GLORIA
Address: 7514 OLD KINGS RD S
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: PALMER, DAVID
Address: 7522 OLD KINGS ROAD, SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: ADKINSON, WILLIAM
Address: 7560 OLD KINGS ROAD, SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CHARLES F. WINNEY

PRES

02/13/2009

Electronic Signature of Signing Officer or Director

Date