

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08386

FILED  
May 10, 2005  
Secretary of State

Entity Name: SAN JOSE FOREST II HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6439 WOOD VALLEY ROAD  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

6319 CHRISTOPHER CREEK RD W.  
JACKSONVILLE, FL 32217 US

**Current Mailing Address:**

6439 WOOD VALLEY ROAD  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

6319 CHRISTOPHER CREEK RD W.  
JACKSONVILLE, FL 32217 US

FEI Number: 59-2646149      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HILL, MICHAEL D  
6439 WOOD VALLEY RD  
JACKSONVILLE, FL 32217 US

**Name and Address of New Registered Agent:**

JOEL, TINA P  
6319 CHRISTOPHER CREEK RD W.  
JACKSONVILLE, FL 32217 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: TINA P. JOEL

05/10/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COHEN, RON  
Address: 2828 WOOD VALLEY CT  
City-St-Zip: JACKSONVILLE, FL 32217

Title: V ( ) Delete  
Name: MCBURNEY, CHARLES  
Address: 6326 CHRISTOPHER CREEK RD. E  
City-St-Zip: JACKSONVILLE, FL 32217

Title: TD ( ) Delete  
Name: HILL, MICHAEL D  
Address: 6439 WOOD VALLEY RD  
City-St-Zip: JACKSONVILLE, FL 32217

Title: S ( ) Delete  
Name: MARSHALL, DAVID  
Address: 6359 CHRISTOPHER CREEK RD E.  
City-St-Zip: JACKSONVILLE, FL

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

Title: PD (X) Change ( ) Addition  
Name: SPITZER, MICHAEL  
Address: 2919 CHRISTOPHER CREEK RD. N.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: V (X) Change ( ) Addition  
Name: BOLWELL, FRASER  
Address: 6323 CHRISTOPHER CREEK RD. N.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: TD (X) Change ( ) Addition  
Name: JOEL, TINA P  
Address: 6319 CHRISTOPHER CREEK RD. W.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: S (X) Change ( ) Addition  
Name: SPITZER, KIMBERLY  
Address: 2919 CHRISTOPHER CREEK RD N  
City-St-Zip: JACKSONVILLE, FL 32217

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TINA P. JOEL

TD

05/10/2005

Electronic Signature of Signing Officer or Director

Date