

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08386

FILED  
Jul 03, 2008  
Secretary of State

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

**Current Principal Place of Business:**

6319 CHRISTOPHER CREEK RD W.  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

2852 WOOD VALLEY CT  
JACKSONVILLE, FL 32217 US

**Current Mailing Address:**

6319 CHRISTOPHER CREEK RD W.  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

2852 WOOD VALLEY CT  
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:**

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

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

FOOTE, CRAIG W  
2852 WOOD VALLEY CT.  
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: CRAIG W FOOTE

07/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

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

Title: S ( ) Delete  
Name: BROWN, LYNNE  
Address: 2961 CHRISTOPHER CREEK RD N  
City-St-Zip: JACKSONVILLE, FL 32217

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: MCBURNEY, CHARLES  
Address: 6329 CHRISTOPHER CREEK RD. E.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change ( ) Addition  
Name: KELLY, CRAIG  
Address: 6317 WOOD VALLEY RD  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change ( ) Addition  
Name: FOOTE, CRAIG W  
Address: 2852 WOOD VALLEY CT  
City-St-Zip: JACKSONVILLE, FL 32217

Title: SD (X) Change ( ) Addition  
Name: BROWN, LYNNE  
Address: 2961 CHRISTOPHER CREEK RD N  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Change (X) Addition  
Name: MURPHY, PATRICK  
Address: 2939 DUPONT AVE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Change (X) Addition  
Name: OETJEN, JOHN  
Address: 6349 CHRISTOPHER CREED RD, W.  
City-St-Zip: JACKSONVILLE, FL 32217

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: CRAIG W FOOTE

D

07/03/2008

Electronic Signature of Signing Officer or Director

Date