## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08386

FILED Jul 03, <u>2</u>008 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 6319 CHRISTOPHER CREEK RD W. 2852 WOOD VALLEY CT JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217 US **Current Mailing Address: New Mailing Address:** 6319 CHRISTOPHER CREEK RD W. 2852 WOOD VALLEY CT JACKSONVILLE, FL 32217 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: Name and Address of New Registered Agent: JOEL, TINA P FOOTE, CRAIG W 6319 CHRISTOPHER CREEK RD W. 2852 WOOD VALLEY CT. US JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete SPITZER, MICHAEL MCBURNEY, CHARLES Name: Name: 2919 CHRISTOPHER CREEK RD. N. Address: 6329 CHRISTOPHER CREEK RD. E. Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 Title: Title: (X) Change ( ) Addition ( ) Delete Name: BOLWELL, FRASER Name: KELLY, CRAIG Address: 6323 CHRISTOPHER CREEK RD. N. Address: 6317 WOOD VALLEY RD City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 Title: Title: (X) Change ( ) Addition ( ) Delete JOEL, TINA P Name: FOOTE, CRAIG W Name: 6319 CHRISTOPHER CREEK RD. W. 2852 WOOD VALLEY CT Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 Title: () Delete Title: SD (X) Change ( ) Addition Name: BROWN, LYNNE Name: BROWN, LYNNE 2961 CHRISTOPHER CREEK RD N 2961 CHRISTOPHER CREEK RD N Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 Title: () Delete Title: ( ) Change (X) Addition MURPHY, PATRICK Name: Name: 2939 DUPONT AVE Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32217 Title: () Delete Title: ( ) Change (X) Addition OETJEN, JOHŃ Name: Name: Address: Address: 6349 CHRISTOPHER CREED RD, W. JACKSONVILLE, FL 32217 City-St-Zip: 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: CRAIG W FOOTE D 07/03/2008