

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09670

FILED
Mar 23, 2011
Secretary of State

Entity Name: EGRET POINT OFFICE BUILDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

600 ST. JOHNS BLUFF ROAD NORTH
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

Current Mailing Address:

600 ST. JOHNS BLUFF ROAD NORTH
JACKSONVILLE, FL 32225 US

New Mailing Address:

FEI Number: 59-2650053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEROLLE, AUGUSTUS L
1153 ROMAINE CIRCLE E
JACKSONVILLE, FL 32225 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: STD
Name: MEROLLE, AUGUSTUS L
Address: 1153 ROMAINE CIRCLE E
City-St-Zip: JACKSONVILLE, FL

Title: D
Name: GOODE, GAIL
Address: 5320 CLIFTON ROAD
City-St-Zip: JACKSONVILLE, FL

Title: D
Name: PULSEFER, KELLY
Address: 3674 W BUCKSKIN TR
City-St-Zip: JACKSONVILLE, FL 32277

Title: PD
Name: CLARKSON, JOHN
Address: 600 ST. JOHNS BLUFF RD N.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: TALBOT, GERALD
Address: 6054 ARLINGTON EXPWY #1
City-St-Zip: JACKSONVILLE, FL

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: JOHN CLARKSON

PD

03/23/2011

Electronic Signature of Signing Officer or Director

Date