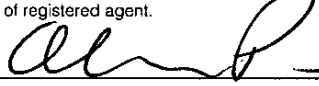


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90124 006 ****70.00

DOCUMENT # N12007 1. Entity Name THE COURTYARDS AT MAYPORT I CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business PROFESSIONAL COMMUNITY MGT INC 786 BLANDING BLVD #118 ORANGE PARK, FL 32065 US			Mailing Address PROFESSIONAL COMMUNITY MGT INC 786 BLANDING BLVD #118 ORANGE PARK, FL 32065 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 59-2907669	
City & State		City & State		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
Zip		Zip		Country	
6. Name and Address of Current Registered Agent PERRY, ALAN 786 BLANDING BLVD STE 118 ORANGE PARK, FL 32065				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEMPLE, KEITH 2205 SPANISH MASS DR. JACKSONVILLE, FL 32246 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT VAUGHN, GEORGE 126 BAY ST. NEPTUNE BEACH, FL 32233 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DORMEN, ELIZABETH F 2207 IVY GAIL DR E JACKSONVILLE, FL 32225 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Terri Stratmann 604 Courageous Ct Atlantic Beach, FL 32233 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSBORNE, STEVE 1104 DEFENDER CT ATLANTIC BEACH, FL 32233 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Monica Savage 100 Fairways Park Blvd #1104 Ponte Vedra Beach, FL 32082 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP EDWARDS, DONNA 1504 CHALLENGER CT. W ATLANTIC BEACH, FL 32233 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Misty McGhee 1501 Challenger Ct. W. Atlantic Beach, FL 32233 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, MARGARET 2001 CHALLENGER CT. E. ATLANTIC BEACH, FL 32233 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 04-17-06 Daytime Phone #		