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	Mailing Address
PROFESSIONAL COMMUNITY MGT INC 786 BLANDING BLVD #118 ORANGE PARK, FL 32065 US	PROFESSIONAL COMMUNITY MGT INC 786 BLANDING BLVD #118 ORANGE PARK, FL 32065 US

01182006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2907669 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PERRY, ALAN 786 BLANDING BLVD STE 118 ORANGE PARK, FL 32065	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) DATE

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	DP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT VAUGHN, GEORGE 126 BAY ST. NEPTUNE BEACH, FL 32233	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS DORMEN, ELIZABETH F 2207 IVY GAIL DR E JACKSONVILLE, FL 32225	☒ Delete	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	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	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		☐ 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: _____ 04-17-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #