2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # N15092 1. Entity Name 02-27-2006 90063 031 ****61.25 GARDEN CLUB OF ORANGE PARK, INC. Principal Place of Business Mailing Address 1820 SMITH ST PO BOX 1431 **ORANGE PARK FL 32073 ORANGE PARK FL 32067-1431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State Applied For City & State 4. FEI Number 59-2719835 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WILSON, RACHEL D 39 FOX VALLEY DRIVE Street Address (P.O. Box Number is Not Acceptable **ORANGE PARK FL 32073** City 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 obligation 2-11-06 uas. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be \Box ∴ - Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PD PD TITLE Delete TITLE Change ☐ Addition Rita Harper 283 Edinburgh Ln. HOWARD, HELEN NAME NAME 2037 SALT MYRTLE LANE STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** Orange Park, FL 32073 CITY-ST-ZIP CITY-ST-ZIP 1VD ☐ Delete TITLE **Change** Addition TITLE PERRY, ETHELIA MARGARET STANFIELD 224 FLEMING DRIVE NAME NAME 3336 HOLLYCREST BLVD STREET ADDRESS STREET ADDRESS DRIVE ORANGE PARK FL 32065 CITY-ST-ZIP CITY-ST-ZIP TITA F 2VD ☐ Delete TITI F √ Change ☐ Addition NAME CLARK, CAROLYN NAME STREET ADDRESS 560 CLAIRE LANE STREET ADDRESS ORANGE PARK FL 32073 CITY-ST-ZIP 32073 CITY-ST-7IP 3VD Change Addition TITLE TITLE ☐ Delete NAME HARTLEY, BECKY NAME ZANA BURNETTE STREET ADDRESS 697 ARTHUR MOORE DR. STREET ADDRESS 1844 The G CITY-ST-7/P CITY-ST-ZIP GREEN COVE SPRINGS FL 32043 4VD TITLE ☐ Delete TITLE Addition STANFIELD, MARGARET NAME 224 FLEMING DR. STREET ADDRESS STREET ADDRESS CiRcle **GREEN COVE SPRINGS FL 32043** CITY-ST-ZIP CITY-ST-ZIP RDS TITLE Oelete TITLE LINDA MOHART BEDSOL, SARAH NAME NAME 674 MORGAN CIRCLE S. STREET ADDRESS STREET ADDRESS ORANGE PARK FL 32073 CITY-ST-ZIP CITY-ST-ZIP PARK

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 19. 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 ampowered.

Kachel D

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FILED

Feb 27, 2006 8:00 am

2-02-06 272-4252