## 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N16297

FILED Mar 25, 2013 Secretary of State

Entity Name: ST. JOHNS WOOD OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O SAM BLANDFORD 3007 ST JOHNS AV

3011 ST. JOHNS AVE JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205

Current Mailing Address: New Mailing Address:

C/O SAM BLANDFORD 3007 ST JOHNS AV

3011 ST. JOHNS AVE JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205

FEI Number: 59-2725545 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLANDFORD, SAM

MULVANEY, SHIRLEY
3011 ST. JOHNS AVE

MULVANEY, SHIRLEY
3007 ST. JOHNS AVE

JACKSONVILLE, FL 32205 US JACKSONVILLE, FL 32205 US

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: SHIRLEY MULVANEY 03/25/2013

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: VP

 Name:
 MULVANEY, SHIRLEY

 Address:
 3007 ST JOHNS AV

 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: TD

Name: KIMBERLY, KARNES
Address: 3003 ST. JOHNS AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: SD

 Name:
 FREEMAN, LESLIE A

 Address:
 3005 ST JOHNS AVENUE

 City-St-Zip:
 JACKSONVILLE, FL 32205

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: SHIRLEY MULVANEY VP 03/25/2013