2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16779

Apr 22, 2011 Secretary of State

Entity Name: HOLLY OAKS COVE HOMEOWNERS ASSOCIATION, INC.

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

C/O CHARLES BURGESS 1144 HOLLY OAKS COURT JACKSONVILLE, FL 32259 US

New Mailing Address: Current Mailing Address:

C/O CHARLES BURGESS 1144 HOLLY OAKS COURT JACKSONVILLE, FL 32259 US

FEI Number: 59-3298974 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:

BURGESS, CHARLES 1144 HOLLY OAKS COURT JACKSONVILLE, FL 32259 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

CHAMBLISS, KATHLEEN Name: Address: 1192 HOLLY OAKS COVE City-St-Zip: JACKSONVILLE, FL 32259

Title:

Name: PRYCE-JONES, ROBERT Address: 1170 HOLLY OAKS COVE City-St-Zip: JACKSONVILLE, FL 32259

Title:

VAGHEFI, REZA Name: Address: 1065 HOLLY OAKS COVE

City-St-Zip: JACKSONVILLE, FL 32259

Title: DS

Name: HUMPHREY, CATHY Address: 1052 HOLLY OAKS COVE

City-St-Zip: JACKSONVILLE, FL

DΡ Title:

Name: BURGESS, CHARLES Address: 1144 HOLLY OAKS CT City-St-Zip: JACKSONVILLE, FL

Title:

LOWE, ELIZABETH Name: Address: 1076 HOLLY OAKS COVE JACKSONVILLE, FL 32259 City-St-Zip:

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: ELIZABETH LOWE DT 04/22/2011