

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17373

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: WILLIAMSBURG PARK ASSOCIATION, INC.

**Current Principal Place of Business:**

3840-1 WILLIAMSBURG PK BLVD  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

3840 -1 WILLIAMSBURG PARK BLVD  
JACKSONVILLE, FL 32257

**New Mailing Address:**

FEI Number: 59-2759813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSS, CHRISTINE  
3830 5 WILLIAMSBURG PARK BLVD  
JACKSONVILLE, FL 32257 US

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

ROSS, CHRISTINE  
3830- 5 WILLIAMSBURG PARK BLVD  
JACKSONVILLE, FL 32257 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: CHRISTINE ROSS

04/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HANSEN, CHARLES  
Address: 3840-1 WILLIAMSBURG PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP ( ) Delete  
Name: WALTON, SCOTT  
Address: 3840 WILLIAMSBURG PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: T ( ) Delete  
Name: HANSEN, SHIRLEY  
Address: 3840 -1 WILLIAMSBURG PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Delete  
Name: ROSS, CHRISTINE  
Address: 3840 WILLIAMSBURG PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: BARTON, CREWS  
Address: 3840 -1 WILLIAMSBURG PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: ROSS, CHRISTINE  
Address: 3830-5 WILLIAMSBURG PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHIRLEY HANSEN

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date