



# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2008 8:00 am**  
**Secretary of State**

03-13-2008 90030 039 \*\*\*\*61.25

<b>DOCUMENT # N19272</b> 1. Entity Name <b>BARROW ISLAND AT JONATHAN'S LANDING HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>SEACREST SERVICES, INC.</b> <b>2400 CENTRE PARK WEST DR SUITE 175</b> <b>WEST PALM BEACH, FL 33409 US</b>			Mailing Address <b>SEACREST SERVICES, INC.</b> <b>2400 CENTRE PARK WEST DR SUITE 175</b> <b>WEST PALM BEACH, FL 33409 US</b>		
2. Principal Place of Business - No P.O. Box # <b>Accounting Department, Inc.</b> Suite, Apt. #, etc. <b>185 E. Indiantown Rd., Ste. 127</b> City & State <b>Jupiter, FL</b> Zip <b>33477</b>		3. Mailing Address <b>Accounting Department, Inc.</b> Suite, Apt. #, etc. <b>185 E. Indiantown Rd., Ste. 127</b> City & State <b>Jupiter, FL</b> Zip <b>33477</b>		4. FEI Number <b>65-0004068</b> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>MOFFAT, JOHN</b> <b>610 SEACREST SERVICES, INC.</b> <b>125 WEST INDIAN TOWN RD</b> <b>JUPITER, FL 33458</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>Accounting Dept. Inc.</b> <b>185 E Indiantown Rd #127</b> City <b>Jupiter</b> <b>FL</b> Zip Code <b>33477</b>			
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  DATE <b>3/3/08</b> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOFFAT, JOHN 125 WEST INDIAN TOWN RD SUITE 205 JUPITER, FL 33458	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Moffat, John 185 E. Indiantown Rd., Ste. 127 Jupiter, FL 33477
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AMATO, JOHN 125 INDIAN TOWN RD SUITE 205 JUPITER, FL 33458	<input checked="" type="checkbox"/> Delete	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD- COFFEY, JOHN 125 WEST INDIAN TOWN RD SUITE 205 JUPITER, FL 33458	<input type="checkbox"/> Delete	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Coffey, John 185 E. Indiantown Rd., Ste. 127 Jupiter, FL 33477	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Phillips, Anthony 185 E. Indiantown Rd., Ste. 127 Jupiter, FL 33477	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Phillips, Anthony 185 E. Indiantown Rd., Ste. 127 Jupiter, FL 33477	<input type="checkbox"/> Change <input type="checkbox"/> 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:  DATE <b>3/11/08</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					