

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24613

FILED
Mar 12, 2009
Secretary of State

Entity Name: WORTHINGTON GLEN COMMUNITY ASSOCIATION, INC. OF JACKSONVILLE

Current Principal Place of Business:

1740 GRASMER CT
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 23506
JACKSONVILLE, FL 32241

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEDY, ROBERT K
1740 GRASMER CT
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: STAN, MICHAEL
Address: 11770 WORDSWORTH CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: ORMON, STEVE
Address: 11809 WORDS WORTH CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: S () Delete
Name: JONES, DAVID
Address: 1729 LORD BYRON LN
City-St-Zip: JACKSONVILLE, FL 32223

Title: T () Delete
Name: KENNEDY, ROBERT K
Address: 1740 GRASMER CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: V () Delete
Name: WATSON, GINNY
Address: WORDSWORTH COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: D (X) Delete
Name: DUNCAN, LAMAR
Address: 11801 WORDSWORTH CT
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: HAYES, JASON
Address: 11788 WORDSWORTH CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: S (X) Change () Addition
Name: OVERMAN, DONNA
Address: 1723 LORD BYRON LN
City-St-Zip: JACKSONVILLE, FL 32223

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

Title: V (X) Change () Addition
Name: STUBBS, DAVID
Address: 11734 WORDSWORTH COURT
City-St-Zip: JACKSONVILLE, FL 32223

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

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: ROBERT K. KENNEDY

T

03/12/2009

Electronic Signature of Signing Officer or Director

Date