

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30879

FILED
Jan 30, 2012
Secretary of State

Entity Name: MIZNER COURT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BUCKEYE ASSOCIATION MANAGEMENT, LLC
4300 S. PLAZA GATE LANE
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

C/O BUCKEYE ASSOCIATION MANAGEMENT, LLC
P.O. BOX 600099
JACKSONVILLE, FL 32260 US

New Mailing Address:

FEI Number: 59-2894947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCKEYE ASSOCIATION MANAGEMENT, LLC
4300 S. PLAZA GATE LN
JACKSONVILLE, FL 32217 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: D
Name: MC ELROY, JACK
Address: P.O. BOX 600099
City-St-Zip: JACKSONVILLE, FL 32260

Title: P
Name: MULDOON, BOB
Address: P.O. BOX 600099
City-St-Zip: JACKSONVILLE, FL 32260

Title: S
Name: PLYLER, JO ANNE
Address: P.O. BOX 600099
City-St-Zip: JACKSONVILLE, FL 32260

Title: VP
Name: PLUMB, DENIS
Address: P.O. BOX 600099
City-St-Zip: JACKSONVILLE, FL 32260

Title: D
Name: VANORMER, CARL
Address: P.O. BOX 600099
City-St-Zip: JACKSONVILLE, FL 32260

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: ELTON CONANT

CAM

01/30/2012

Electronic Signature of Signing Officer or Director

Date