

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33163

FILED
Apr 08, 2005
Secretary of State

Entity Name: THE SANCTUARY OF JACKSONVILLE BEACH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-3132823 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JAMES W HART JR
SENTRY MANAGEMENT INC
2180 W SR 434, SUITE 5000
LONGWOOD, FL 327795044 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: PD (X) Delete
Name: DAY, RUTH
Address: 2064 GREEN HERON PT
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VPD () Delete
Name: ROSENBLATT, AL
Address: 1650 BLUE HERON LN
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TD () Delete
Name: BAKER, MIKE
Address: 1628 BLUE HERON LN
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: SD () Delete
Name: AMMERMAN, JENNIFER
Address: 3088 SANCTUARY BLVD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D (X) Delete
Name: LEE, MARK
Address: 1891 BLUE HERON LN
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MOULTON, JOHN
Address: 1631 BLUE HERON LN
City-St-Zip: JACKSONVILLE, FL 32250

Title: VPD (X) Change () Addition
Name: BAKER, MIKE
Address: 1628 BLUE HERON LN
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIKE BAKER

VPD

04/08/2005

Electronic Signature of Signing Officer or Director

Date