## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33163

Apr 09, 2008 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779

**Current Mailing Address: New Mailing Address:** 

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779

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

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

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434, SUITE 5000 LONGWOOD, FL 327795044 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

CALLAN, PATRICIA CALLAN, PAT Name: Name: 1093 BLUE HERON LN Address: 1093 BLUE HERON LN W Address:

JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

SCHILBRACK, SCOTT Name: SCHILBRACK, SCOTT Name:

Address: 1849 BLUE HERON LN Address: 1849 BLUE HERON LN

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: () Delete Title: **VPD** (X) Change ( ) Addition

PEARSON, RON PEARSON, RON Name: Name: Address: 3526 SANCTUARY BLVD Address: 3526 SANCTUARY BLVD

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: STD ( ) Delete Title: () Change () Addition

Name: HUYLER, ELAINE Name: Address: 3597 SANCTUARY BLVD Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

MEYNE, FRITZ ROSENBLAT, AL Name: Name: 1298 BLUE HERON LN 1650 BLUE HERON LN Address: Address:

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: PAT CALLAN PD 04/09/2008