

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 08, 2008
Secretary of State

DOCUMENT# N43286

Entity Name: PALOMA POINT OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O AWAKENINGS ASSOC. MGMT., INC.
4213 COUNTY RD. 218., STE. 1
MIDDLEBURG, FL 32068 US**New Principal Place of Business:****Current Mailing Address:**C/O AWAKENINGS ASSOC. MGMT., INC.
4213 COUNTY RD. 218., STE. 1
MIDDLEBURG, FL 32068 US**New Mailing Address:****FEI Number:** 59-3036138**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DELCOMYN, VINA
4213 COUNTY RD. 218
MIDDLEBURG, FL 32068 US**Name and Address of New Registered Agent:**DELCOMYN, VINA
4213 COUNTY RD. 218
SUITE 1
MIDDLEBURG, FL 32068 US

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: _____

09/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: RENFRO, MARK
Address: 4159 PALOMA POINT COURT
City-St-Zip: JACKSONVILLE, FL**Title:** VPD () Delete
Name: LANGLEY, BJ
Address: 4183 PALOMA POINT COURT
City-St-Zip: JACKSONVILLE, FL 32017**Title:** S () Delete
Name: JUDGE, SHANNON
Address: 4160 PRIMA VISTA CIRCLE N
City-St-Zip: JACKSONVILLE, FL 32217**Title:** D () Delete
Name: GALLOGLY, LOREN
Address: 4111 PALOMA POINT COURT
City-St-Zip: JACKSONVILLE, FL 32217**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: LANGLEY, BJ
Address: 4183 PALOMA POINT COURT
City-St-Zip: JACKSONVILLE, FL 32017**Title:** VPD (X) Change () Addition
Name: JUDGE, SHANNON
Address: 4160 PRIMA VISTA CIRCLE N
City-St-Zip: JACKSONVILLE, FL 32217**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD () Change (X) Addition
Name: ELDRETH, MARYANNE
Address: 4120 PRIMA VISTA CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32217**Title:** D () Change (X) Addition
Name: GALLOGLY, LOREN
Address: 4111 PALOMA POINT
City-St-Zip: JACKSONVILLE, FL 32217

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: MARK RENFRO

PD

09/08/2008

Electronic Signature of Signing Officer or Director

Date