2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48148

FILED May 02, 2006 Secretary of State

Entity Name: THE COLONY ASSOCIATION OF NASSAU COUNTY, INC.

Current Principal Place of Business:		New Principal Place of Business:
	DEWINDS WAY BLAND, FL 32034 US	
Current M	lailing Address:	New Mailing Address:
	DEWINDS WAY SLAND, FL 32034 US	
n accordan	: 59-3561010 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did not I Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired () receive the prior notice. Name and Address of New Registered Agent:
	SMEISTER	CACTUS PATCH MANAGEMENT SERVICES, INC.
117A ESTI	RADA STREET DINA BEACH, FL 32034 US	631 TARPON AVENUE, BOX 6365
LKINAINL	711/A BEACH, 1 E 32034 03	FERNANDINA BEACH, FL 32034 US
The above in the State	named entity submits this statement for the period of Florida.	urpose of changing its registered office or registered agent, or both,
SIGNATUR	RE: SEAN KELLY	05/02/2006
	Electronic Signature of Registered Age	nt Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	S () Delete CODDINGTON, JUNE 4734 GULFSTREAM CT. AMELIA ISLAND, FL 32034	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VP () Delete LATINA, PAUL 4756 ST MARC COURT AMELIA ISLAND, FL 32034	Title: VP (X) Change () Addition Name: WEBSTER, CAROL Address: 4732 WESTWIND COURT City-St-Zip: AMELIA ISLAND, FL 32034
Title: Name: Address: City-St-Zip:	D () Delete STIFLER, JOHN 4749 MARTINIQUE COURT FERNANDINA BEACH, FL 32034	Title: D (X) Change () Addition Name: HUTTON, BETSY Address: 4748 LEMON COURT City-St-Zip: FERNANDINA BEACH, FL 32034
Title: Name: Address: City-St-Zip:	P () Delete HILDEBRAND, THOMAS 4762 ST MARC COURT	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete LOVELL, MARYANN 4742 ST, MARC CT. AMELIA ISLAND, FL 32034	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	D () Delete THARIN, RUSSELL	Title: () Change () Addition Name:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS HILDEBRAND P 05/02/2006