

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48352

FILED
Feb 25, 2009
Secretary of State

Entity Name: COLLINS LAKES ESTATES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

KENNETH D. BUTLER
8131 PINEVERDE LN.
JACKSONVILLE, FL 32244 US

New Principal Place of Business:

KELLY PIERSON
8130 CORKY LANE
JACKSONVILLE, FL 32244 US

Current Mailing Address:

COLLINS LAKE ESTATES
P.O. BOX 440220
JACKSONVILLE, FL 32222 US

New Mailing Address:

FEI Number: 59-3125688 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, KENNETH D
8131 PINEVERDE LN.
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

PIERSON, KELLY M TREASUR
8130 CORKY LANE
JACKSONVILLE, FL 32244 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: KELLY M. PIERSON 02/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PIERSON, MARTIN
Address: 8130 CORKY LN
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: BUTLER, KENNETH
Address: 8131 PINEVERDE LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VD () Delete
Name: SMITH, NANCY
Address: 8067 PINEVERDE LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: TD () Delete
Name: LOWINSKI, NANCY
Address: 8171 PINEVERDE LN
City-St-Zip: JACKSONVILLE, FL 32244

Title: SD (X) Delete
Name: STACYEY, ANN
Address: 8060 CORKEY CT. E
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STACEY, ELLIS
Address: 8060 CORKY CT. EAST
City-St-Zip: JACKSONVILLE, FL 32244

Title: SEC (X) Change () Addition
Name: MONTGOMERY, MICHEAL
Address: 5449 CORKY CT. EAST
City-St-Zip: JACKSONVILLE, FL 32244

Title: TRES (X) Change () Addition
Name: PIERSON, KELLY M
Address: 8130 CORKY LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP (X) Change () Addition
Name: SMITH, NANCY
Address: 8067 PINEVERDE LANE
City-St-Zip: JACKSONVILLE, FL 32244

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

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: KELLY M. PIERSON TRES 02/25/2009

Electronic Signature of Signing Officer or Director Date