## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 30, 2004 8:00 am Secretary of State DOCUMENT # N50603 04-30-2004 90373 030 \*\*\*\*61.25 ST. JOHNS WOODS OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 8502 MAJESTIC OAKS DR. S. P.O. BOX 8703 JACKSONVILLE, FL 32277 JACKSONVILLE, FL 32239 2. Principal Place of Business 3. Mailing Address 3440 Turkev Oaks Dr Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 59-3153926 Jacksonville, FL Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name\* Hank J. Pocopannii CHERYL GOSSARD Street Address (P.O. Box Number is Not Acceptable) 8502 MAJESTIC OAKS DRIVE S. JACKSONVILLE, FL 32277 3440 Turkey Oaks Drive Jacksonville 8. The above named entity submits this statement f or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of register 9-26-69 SIGNATURI (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to $\Box$ Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. D TITLE Delete TITLE Director NAME GOSSARD, CHERYL NAME Rick Bame 8502 MAJESTIC OAKS DRIVE S. STREET ADDRESS STREET ADDRESS 8524 Turkey Oaks Drive S. CITY-ST-ZIP JACKSONVILLE, FL 32277 CITY-ST-ZIP Jacksonville, FL 32277 TITLE ☐ Delete TITLE Change ☐ Addition BRUNNER, LEO NAME NAME STREET ADDRESS 3388 SHAUNA OAKS CIRCLE E. STREET ADDRESS JACKSONVILLE, FL. 32277 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Secretary/Treasurer MYERS CINDY NAME NAME STREET ADDRESS 3485 SHAUNA OAKS DRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32277 CITY-ST-ZIP Delete TITLE ☐ Addition NAME BUTTS, RON NAME STREET ADDRESS STREET ADDRESS 3436 TURKEY OAKS COURT CITY-ST-ZIP JACKSONVILLE, FL 32277 CITY-ST-ZIP X Delete TITLE TITLE ☐ Change ☐ Addition SWIM, ELIZABETH NAME NAME STREET ADDRESS STREET ADDRESS 3440 TURKEY OAKS DRIVE CITY-ST-ZIP JACKSONVILLE, FL 32277 CITY-ST-ZIP Director Delete **X** Addition DUTTON, GREG Hank Pocopanni NAME NAME 3440 Turkey Oaks Drive S. STREET ADDRESS 8509 S MAJESTIC OAKS DR STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32277 Jacksonville, FL 32277 12. I hereby certify that the information supplied with this filling does not qualify 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 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 of this empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if her like empowered. changed, or on an attachment wi 4-21-64

SIGNING OFFICER OR DIRECTOR

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