2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# N50809

Entity Name: GREENRIDGE UNIT TWO HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1987
YULEE, FL 320971987 US

New Mailing Address:

FEI Number: 59-3166180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWELL, TERRELL J.
463499 STATE ROAD 200
YULEE, FL 32097 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	CHARTRAND, PAULA	
Address:	1808 FAIRFAX CT SOUTH	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	VPD	(X) Delete
Name:	DANIEL, ROY	
Address:	1828 FAIRFAX CT SOUTH	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	TD	( ) Delete
Name:	DORAN, RICK	
Address:	1801 MANCHESTER CT	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	D	( ) Delete
Name:	LOCKHART, BRUCE	
Address:	1508 SHAKER COVE CT	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	D	( ) Delete
Name:	SHAFER, RICK	
Address:	1204 MANCHESTER CT	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	ARBC	( ) Delete
Name:	CALVERT, CLIFF	
Address:	1836 FAIRFAX CT.	
City-St-Zip:	JACKSONVILLE, FL 32259	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TERRELL J POWELL RA 04/22/2005
Electronic Signature of Signing Officer or Director — Date