

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51224

FILED
Apr 30, 2009
Secretary of State

Entity Name: SECRET HILLS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

3426 COZUMEL COURT
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

P O BOX 350261
JACKSONVILLE, FL 32235 US

New Mailing Address:

FEI Number: 59-3163303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, P CAMPBELL
1835 N THIRD ST
JACKSONVILLE BEACH, FL 32250 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: VD () Delete
Name: BURR, JEFFERY
Address: 3420 COZUMEL CT.
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD () Delete
Name: HENKE, RANDALL
Address: 3426 COZUMEL CT.
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD () Delete
Name: GRAYSON, STEPHEN
Address: 3415 COZUMEL CT
City-St-Zip: JACKSONVILLE, FL 32225

Title: PD (X) Delete
Name: SMITH, MICHAEL
Address: 3341 CANCUN DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, MICHAEL
Address: 3341 CANCUN DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32225

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 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: RANDALL D HENKE

TD

04/30/2009

Electronic Signature of Signing Officer or Director

Date