

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000174

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: FT. CAROLINE HILLS COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

3362 MILLCREST DR  
JACKSONVILLE, FL 32277 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 11987  
JACKSONVILLE, FL 32239 US

**New Mailing Address:**

FEI Number: 59-3175396

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITHEY, JOAN S  
3362 MILLCREST DRIVE  
JACKSONVILLE, FL 32277 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: P ( ) Delete  
Name: DUNHAM, MICHAEL  
Address: 3378 MILLCREST DR  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP ( ) Delete  
Name: FORTUNATO, JOE  
Address: 3358 MILLCREST PLACE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: T ( ) Delete  
Name: SMITHEY, JOAN  
Address: 3362 MILLCREST DR  
City-St-Zip: JACKSONVILLE, FL 32277

Title: S ( ) Delete  
Name: LEONARD, LEO  
Address: 7049 HILL CREST DR S  
City-St-Zip: JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: BARNETT, GLENN  
Address: 3411 MILLCREST DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

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

Title: S (X) Change ( ) Addition  
Name: LEONARD, LEO  
Address: 7049 MILLCREST DR S  
City-St-Zip: JACKSONVILLE, FL 32277

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: JOAN S. SMITHEY

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date