

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000998

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: CARRIAGE CROSSING II ASSOCIATION, INC.

## Current Principal Place of Business:

4213 COUNTY RD 218  
MIDDLEBURG, FL 32068 US

## Current Mailing Address:

P. O. BOX 949  
MIDDLEBURG, FL 320500949 US

## New Principal Place of Business:

155 ST. JOHNS BUSINESS PLACE  
SUITE 201  
ST. AUGUSTINE, FL 32095 US

## New Mailing Address:

P. O. BOX 600033  
ST. JOHNS, FL 32260 US

FEI Number: 59-3173433

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MERCER PROPERTY MANAGEMENT  
11512 LAKE MEAD  
SUITE 405  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

PROPERTY MANAGEMENT PARTNERS  
155 ST. JOHNS BUSINESS PLACE  
SUITE 201  
ST. AUGUSTINE, FL 32095 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: ELAINE BROOKS

04/28/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete  
Name: NARAGON, CONNIE  
Address: 4393 PRAIRIE VIEW DR S.  
City-St-Zip: JACKSONVILLE, FL 32258

Title: DT ( ) Delete  
Name: SHETROM, JENNIFER  
Address: 4371 PRAIRIE VIEW DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32258

Title: SP ( ) Delete  
Name: PETRONE, ANNE  
Address: 4376 PRAIRIE VIEW DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32258

Title: DP ( ) Delete  
Name: COWDEN, PAM  
Address: 12332 CYRSTAL CREEK COURT  
City-St-Zip: JACKSONVILLE, FL 32258

Title: D ( ) Delete  
Name: FERRELL, SUE  
Address: 4340 SYCAMORE PASS COURT WEST  
City-St-Zip: JACKSONVILLE, FL 32258

Title: D ( ) Delete  
Name: BRYANT, CATHARINE  
Address: 12333 CRYSTAL CREEK COURT  
City-St-Zip: JACKSONVILLE, FL 32058

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: COWDEN, PAMELA  
Address: P.O.BOX 600033  
City-St-Zip: ST. JOHNS, FL 32260

Title: DVP (X) Change ( ) Addition  
Name: NARAGON, CONNIE  
Address: P.O.BOX 600033  
City-St-Zip: ST. JOHNS, FL 32260

Title: DS (X) Change ( ) Addition  
Name: PETRONE, ANNE  
Address: P.O.BOX 600033  
City-St-Zip: ST. JOHNS, FL 32260

Title: DT (X) Change ( ) Addition  
Name: SHETROM, JENNIFER  
Address: P.O.BOX 600033  
City-St-Zip: ST. JOHNS, FL 32260

Title: D (X) Change ( ) Addition  
Name: LAPPAN, JAN  
Address: P.O.BOX 600033  
City-St-Zip: ST. JOHNS, FL 32260

Title: D (X) Change ( ) Addition  
Name: LINDER, KELLY  
Address: P.O. BOX 600033  
City-St-Zip: ST. JOHNS, FL 32260

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: PAMELA COWDEN

DP

04/28/2008

Electronic Signature of Signing Officer or Director

Date