2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# N93000001051

Entity Name: SAN PABLO CREEK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-3198061 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANTELL, BYRAN
SIGNATURE REALTY & MGMT
4003 HARTLEY RD
JACKSONVILLE, FL 32257 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: SITTS, RICHARD
Address: 13620 LAS BRISAS WAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: TSD ( ) Delete
Name: AYRES, CARRIE
Address: 13547 SOL COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: FARRELL, LEO
Address: 2008 MERCED CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: VARGAS, DANIEL
Address: 13595 CAPISTRANO DR. S
City-St-Zip: JACKSONVILLE, FL 32224

Title: T (X) Change ( ) Addition
Name: AYRES, CARRIE
Address: 13547 SOL COURT
City-St-Zip: JACKSONVILLE, FL 32224

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

Title: V ( ) Change (X) Addition
Name: MONTAGUE, MIKE
Address: 13637 CAPISTRANO DR S
City-St-Zip: JACKSONVILLE, FL 32224

Title: S ( ) Change (X) Addition
Name: MISCHLER, DEVON
Address: 13600 CAPISTRANO DR S
City-St-Zip: JACKSONVILLE, FL 32224

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: DANIEL VARGAS P 03/12/2009

Electronic Signature of Signing Officer or Director — Date