

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003729

FILED
Jan 20, 2009
Secretary of State

Entity Name: EAGLE HARBOR ASSOCIATION, INC.

Current Principal Place of Business:

5000-18 HIGHWAY 17
267
ORANGE PARK, FL 32006 US

Current Mailing Address:

5000-18 HIGHWAY 17
267
ORANGE PARK, FL 32006 US

New Principal Place of Business:

5000-18 HIGHWAY 17
267
FLEMING ISLAND, FL 32003 US

New Mailing Address:

5000-18 HIGHWAY 17
267
FLEMING ISLAND, FL 32003 US

FEI Number: 59-3198197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAYDON, KARLSON L
5000-18 HIGHWAY 17
#267
ORANGE PARK, FL 32003 US

Name and Address of New Registered Agent:

PARACLETE SVCS, LLC
5000-18 HIGHWAY 17
#267
FLEMING ISLAND, FL 32003 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: THERESA L GRAESER

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KARLSON, GRAYDON L
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: D () Delete
Name: WATERHOUSE, REGINA S
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D () Delete
Name: IGNELZI, RICK
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: D () Delete
Name: CASTILLO, ALFONSO
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: D () Delete
Name: O'CONNER, JOHN
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32003 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KARLSON, GRAYDON L
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32006 US

Title: D (X) Change () Addition
Name: WATERHOUSE, REGINA S
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32006

Title: D (X) Change () Addition
Name: IGNELZI, RICK
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32006 US

Title: D (X) Change () Addition
Name: CASTILLO, ALFONSO
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32006 US

Title: D (X) Change () Addition
Name: O'CONNER, JOHN
Address: PO BOX 9796
City-St-Zip: FLEMING ISLAND, FL 32006 US

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: THERESA L GRAESER

MNGR

01/20/2009

Electronic Signature of Signing Officer or Director

Date