2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004464

Apr 28, 2009 Secretary of State

Entity Name: NEWPORT HOMEOWNERS' ASSOCIATION, INC.

US

Current Principal Place of Business: New Principal Place of Business:

ONE SAN JOSE PLACE

JACKSONVILLE, FL 32257

New Mailing Address: Current Mailing Address:

PO BOX 57911

JACKSONVILLE, FL 32241 US

FEI Number: 59-3208833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARR, LAUREN ONE SAN JOSE PLACE

JACKSONVILLE, FL 32257 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition LEONARD, LARRY LEONARD, LARRY Name: Name: 1029 BERTHA ST Address: 1029 BERTHA ST Address:

City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

Title: () Delete Title: (X) Change () Addition

HAUGABOOK, GLADYS Name: HAUGABOOK, GLADYS Name:

Address: 1084 WOODBRIDGE HOLLOW RD Address: 1084 WOODBRIDGE HOLLOW RD City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

Title: () Delete Title: (X) Change () Addition BLAIR-CRAWFORD, DEBORAH LESTER, NOLA Name: Name:

1101 WOODBRIDGE HOLLOW ROAD Address: Address: 1116 WOODBRIDGE HOLLOW ROAD City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

Title: () Delete Title: SD (X) Change () Addition Name: PARKER, ARTHUR Name: COLEMAN, FLORA 11217 FORESTDALE ROAD Address: 1030 BERTHA STREET Address:

City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

Title: () Delete Title: (X) Change () Addition

BELL, JOHNNY DAVIS, MARY Name: Name:

1092 WOODBRIDGE HOLLOW RD. 1128 BERTHA STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

Title: () Delete Title: (X) Change () Addition

HARTFIELD, EDDIE GILLESPIE, PHILLIP Name: Name: Address: 1104 BERTHA ST. Address: 1060 BERTHA ST. JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218 City-St-Zip: 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: LAUREN CARR MGR 04/28/2009

Electronic Signature of Signing Officer or Director

Date