## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000004700

FILED Jan 24, 2010 Secretary of State

Entity Name: CARRINGTON PLACE OWNERS ASSOCIATION, INC.

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

12226 COUNTRY COVE CT 12270 SCOTTS COVE TRAIL JACKSONVILLE, FL 32225 US JACKSONVILLE, FL 32225 US

Current Mailing Address: New Mailing Address:

P O BOX 350172 JACKSONVILLE, FL 322350172 US

FEI Number: 59-3211711 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:

CRYGIER, CHARLES H

358 FRANKLIN BROOK LANE

JACKSONVILLE, FL 32225 US

BOATWRIGHT, AGHAVNI
12286 SCOTTS COVE TRAIL
JACKSONVILLE, FL 32225 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: AGHAVNI BOATWRIGHT 01/24/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DP

Name: BOATWRIGHT, AGHAVNI
Address: 12286 SCOTTS COVE TRAIL
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT

Name: MCKENDRICK, MATTHEW E Address: 12270 SCOTTS COVE TRAIL City-St-Zip: JACKSONVILLE, FL 32225

Title: DS

Name: BURTON, SHEILA

Address: 12249 SCOTTS COVE TRAIL City-St-Zip: JACKSONVILLE, FL 32225

Title: DV

Name: BOATWRIGHT, MARK
Address: 12286 SCOTTS COVE TRL
City-St-Zip: JACKSONVILLE, FL 32225

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW MCKENDRICK DT 01/24/2010