## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000004700

FILED Jan 21, 2012 Secretary of State

Entity Name: CARRINGTON PLACE OWNERS ASSOCIATION, INC.

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

12270 SCOTTS COVE TRAIL

JACKSONVILLE, FL 32225 US

358 FRANKLIN BROOK LANE

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:

MCKENDRICK, MATTHEW E

12270 SCOTTS COVE TRAIL

JACKSONVILLE, FL 32225

US

CRYGIER, SONDRA

358 FRANKLIN BROOK LANE

JACKSONVILLE, FL 32225

US

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: SONDRA CRYGIER 01/21/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: DP

Name: CRYGIER, SONDRA
Address: 358 FRANKLIN BROOK LANE
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT

Name: SULLIVAN, PATRICK

Address: 12295 COUNTRY COVE COURT City-St-Zip: JACKSONVILLE, FL 32225

Title: DS

Name: BOBISH, JERRILYN

Address: 12244 FRANKLIN BROOK LANE SOUTH

City-St-Zip: JACKSONVILLE, FL 32225

Title: DV

Name: MCKAY, JUDY

Address: 12285 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: SONDRA CRYGIER DP 01/21/2012