

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004897

FILED  
Jul 23, 2006  
Secretary of State

**Entity Name:** GREENLAND HIDEAWAY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

11250 OLD ST. AUGUSTINE ROAD #15 BOX 316  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

12187 BEACH BLVD  
SUITE 4  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

4939 GREENLAND HIDEAWAY DRIVE NORTH  
JACKSONVILLE, FL 32258

**New Mailing Address:**

12620-3 BEACH BLVD  
SUITE 301  
JACKSONVILLE, FL 32246

**FEI Number:** 59-3234353      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TURNER, GERALD D  
4939 GREENLAND HIDEAWAY DRIVE NORTH  
JACKSONVILLE, FL 32258      US

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

JARNUTOWSKI, SHERRIE  
12187 BEACH BLVD  
SUITE 4  
JACKSONVILLE, FL 32246      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: SHERRIE JARNUTOWSKI

07/23/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S      ( ) Delete  
Name: MEDECKE, MIKE  
Address: 11548 GREENLAND HIDEAWAY DRIVE EAST  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP      ( ) Delete  
Name: MILLER, VICTOR  
Address: 4964 GREENLAND HIDEAWAY DR. NORTH  
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: T      ( ) Delete  
Name: HERZBERG, THOMAS W  
Address: 11562 GREENLAND HIDEAWAY DRIVE EAST  
City-St-Zip: JACKSONVILLE, FL 32258

Title: P      ( ) Delete  
Name: TURNER, GERALD D  
Address: 4939 GREENLAND HIDEAWAY DRIVE NORTH..  
City-St-Zip: JACKSONVILLE, FL 32258

Title: PARL      ( ) Delete  
Name: FERGATTO, ANNE  
Address: 4896 GREENLAND HIDEAWAY DR. NORTH  
City-St-Zip: JACKSONVILLE, FL 32258

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GERALD TURNER

P

07/23/2006

Electronic Signature of Signing Officer or Director

Date