

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000055

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** EAGLE'S LANDING PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5995 COVERED CREEK LN  
JACKSONVILLE, FL 32277 US

**New Principal Place of Business:**

**Current Mailing Address:**

5995 COVERED CREEK LN  
JACKSONVILLE, FL 32277 US

**New Mailing Address:**

**FEI Number:** 59-3468372

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATERS, WALTER  
5995 COVERED CREEK LN  
JACKSONVILLE, FL 32277 US

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

WATERS, WALTER R  
5995 COVERED CREEK LN  
JACKSONVILLE, FL 32277 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: WALTER R WATERS

02/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WHORTON, BRUCE  
Address: 6018 WINDING BRIDGE DR  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP  
Name: KARGBO, MICHELLE  
Address: 5988 COVERED CREEK LN  
City-St-Zip: JACKSONVILLE, FL 32277

Title: T  
Name: WATERS, WALTER  
Address: 5995 COVERED CREEK LN  
City-St-Zip: JACKSONVILLE, FL 32277

Title: S  
Name: RUNYAN, MARY  
Address: 4253 COVERED CREEK CT.  
City-St-Zip: JACKSONVILLE, FL 32277

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: WALTER R WATERS

T

02/17/2010

Electronic Signature of Signing Officer or Director

Date