

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002469

FILED
Feb 12, 2009
Secretary of State

Entity Name: COURTYARDS AT MAYPORT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2560 AMERICAS CUP CIRCLE E
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 551260
JACKSONVILLE, FL 32255 US

New Mailing Address:

FEI Number: 59-3382009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANSBACHER & SCHNEIDER PA
5150 BELFORT RD
BLDG 100
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: MATHIES, DOUGLAS
Address: 2560 AMERICAS CUP CIRCLE E
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: D (X) Delete
Name: EDWARDS, BARBARA D
Address: 2530 DEFENDER COURT E
City-St-Zip: ATLANTIC BEACH, FL 32233 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DOUG MATHIES

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date