2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006
Secretary of State

DOCUMENT# N95000005265

Entity Name: ORTEGA CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4213 COUNTRY RD 218
SUITE 1
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 949
MIDDLEBURG, FL 32050

New Mailing Address:

FEI Number: 59-3346017 **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:

DELCOMYN, VINA
4759 LEOPARD CIRCLE
MIDDLEBURG, FL 32068 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: PD ( ) Delete
Name: SHANK, TERESA
Address: 5545 OAK CROSSING DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete
Name: TATEM, SANDY
Address: 8358 OAK CROSSING DR W
City-St-Zip: JACKSONVILLE, FL 32244

Title: SD ( ) Delete
Name: WASHINTON, SALLIE
Address: 5554 OAK CROSSING DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: D (X) Delete
Name: PARRAMORE, HELEN
Address: 5537 OAK CROSSING DR
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: JONES, LENORE
Address: 5736 ENGLISH OAK DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

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: TERESA SHANK PD 07/05/2006

Electronic Signature of Signing Officer or Director — Date