

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000106

FILED
Mar 17, 2009
Secretary of State

Entity Name: MERRILL HILLS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12187 BEACH BLVD
SUITE 4
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

12620-3 BEACH BLVD
#301
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 59-3353296 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JARNUTOWSKI, SHERRIE
12620-3 BEACH BLVD.
#301
JACKSONVILLE, FL 32246 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: LEBERT, NORMAN
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: D (X) Delete
Name: GORACZEWSKI, JIM
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: MARQUEZ, JILL
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: ALSTON, ANDRE
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: BEALYER, HANSLER
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: D (X) Delete
Name: SMITH, BRIAN
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEBERT, NORMAN
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

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

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Name:
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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: SHERRIE JARNUTOWSKI

RA

03/17/2009

Electronic Signature of Signing Officer or Director

Date