2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001064

FILED Mar 19, 2007 Secretary of State

Entity Name: SWEETBRIAR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: ONE SAN JOSE PL STE 34 JACKSONVILLE, FL 32257 US **New Mailing Address: Current Mailing Address:** PO BOX 57911 JACKSONVILLE, FL 32241 US FEI Number: 59-3367650 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARR, LAUREN ONE SAN JOSE PL STE 34 JACKSONVILLE, FL 32257 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LOCKE, GARY LOCKE, GARY Name: Name: 3770 WOODBRIAR DR Address: 3770 WOODBRIAR DR Address: City-St-Zip: ORANGE PARK, FL 32073 US City-St-Zip: ORANGE PARK, FL 32073 US PD Title: () Delete Title: (X) Change () Addition BULMER, BOB Name: BULMER, BOB Name: Address: 3941 HEAVENSIDE COURT Address: 3941 HEAVENSIDE COURT City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073 Title: () Delete Title: (X) Change () Addition SAMDELS, KENDALL SAMDELS, KENDALL Name: Name: 3800 SWEETBRIAR DR Address: 3800 SWEETBRIAR DR Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073 (X) Change () Addition Title: () Delete Title: VPD Name: KIRKEBY, JUNE Name: ULRICH, DOUG 605 THORNBERRY RD. Address: Address: 541 THORNBERRY ROAD City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073 Title: () Delete Title: () Change () Addition CLARK, ROBERTA Name: Name: 3684 MORNING MEADOW LN Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: Title: () Delete Title: () Change (X) Addition CASSEL, BART Name: Name: Address: Address: 3774 WOODBRIAR DRIVE ORANGE PARK, FL 32073 City-St-Zip: 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: LAUREN CARR MGR 03/19/2007