

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002886

FILED
Feb 13, 2009
Secretary of State

Entity Name: SAN PABLO CREEK UNIT 3A OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SIGNATURE REALTY&MANAGEMENT
4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

SIGNATURE REALTY&MANAGEMENT
4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-3379753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTRELL, BRYAN
C/O SIGNATURE REALTY&MANAGEMENT
4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

CANTRELL, BRYAN AGENT
4003 HARTLEY RD.
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: BRYAN CANTRELL

02/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PERKINS, ELISE M
Address: 2059 LAS BRISAS WAY W
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD () Delete
Name: BRYAN, RICHARD
Address: 2061 LAS BRISAS WAY W
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD () Delete
Name: JAESCHKE, LINDA
Address: 2138 NIESA GRANDE LA
City-St-Zip: JACKSONVILLE, FL 32224

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: BRYAN, RICHARD
Address: 2061 LAS BRISAS WAY W
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD (X) Change () Addition
Name: SIGDA, LINDA
Address: 2138 MESA GRANDE LA
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD () Change (X) Addition
Name: MCGRAW, DAVID
Address: 2051 LAS BRISAS CT.
City-St-Zip: JACKSONVILLE, FL 32224

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: ELISE PERKINS

DP

02/13/2009

Electronic Signature of Signing Officer or Director

Date