2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006
Secretary of State

DOCUMENT# N96000004546

Entity Name: EASTPARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11655 CENTRAL PARKWAY, #302
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

11655 CENTRAL PARKWAY, #302
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3401975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCGEHEE, CLIFFORD G
11655 CENTRAL PARKWAY, #302
JACKSONVILLE, FL 32224 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: D ( ) Delete
Name: PEREZ, MARIA
Address: 11757 CENTRAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: SCOTT, DARYLE
Address: 11711 MARCO BEACH DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: LIBERA, DANIEL C
Address: 5353-1 RAMONA BLVD
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete
Name: WORKMAN, DAVE JR
Address: 11702 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete
Name: PETERS, MARK
Address: 3901 REGENT BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: RIDDELL, BILL
Address: 3611 ST. JOHNS BLUFF ROAD -SUITE 1
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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

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 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: CLIFFORD G. MCGEHEE PD 02/03/2006

Electronic Signature of Signing Officer or Director — Date