2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# N97000000916

Entity Name: 2363 DUNN AVENUE ASSOCIATION, INC.

Current Principal Place of Business:

2363 DUNN AVENUE
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

2363 DUNN AVENUE
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-3438028 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POOLE, WESLEY R
2430 LOS ROBLES DRIVE
FERNANDINA BEACH, FL 32034 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: PTD ( ) Delete
Name: GARNER, DAVID T
Address: 5205 LEEWARD COVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SVD ( ) Delete
Name: GARNER, SUELLEN R
Address: 5205 LEEWARD COVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D ( ) Delete
Name: ENGLISH, STEPHEN C
Address: 2363 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218

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:

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: DAVID TOD GARNER, DDS PTD 01/08/2007

Electronic Signature of Signing Officer or Director — Date