2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000001474

TI FILED
Oct 22, 2008
Secretary of State

Entity Name: WESTCHASE MANOR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6640 103RD ST. ONE SAN JOSE PLACE JACKSONVILLE, FL 32244 SUITE 27

SUITE 27 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

6640 103RD ST. PO BOX 57911

JACKSONVILLE, FL 32244 JACKSONVILLE, FL 32241

FEI Number: 59-3548236 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:

FOREHAND, MARIE STAZAC MANAGEMENT, INC. 6640 103RD ST. ONE SAN JOSE PLACE

JACKSONVILLE, FL 32210 US SUITE 27
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: LAUREN CARR 10/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 DVP
 (X) Change () Addition

 Name:
 WANDA, HARRISON

 Name:
 WANDA, HARRISON

Address: 5343 BEACHER COURT Address: 5343 BEACHER COURT
City-St-Zip: JACKSONVILLE, FL 32244
City-St-Zip: JACKSONVILLE, FL 32244

 Title:
 D
 () Delete
 Title:
 DS
 (X) Change () Addition

 Name:
 BEACHER, TAMMI
 Name:
 BEACHER, TAMMI

Address: 5328 BEATLE COURT Address: 5328 BEATLE COURT
City-St-Zip: JACKSONVILLE, FL 32244
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete Title: DP (X) Change () Addition

Name: EISENMENGER, MARINA Name: KOHL, ELLEN
Address: 5332 LACY JANE WAY Address: 8107 TESSA TERRACE F

Address: 5332 LACY JANE WAY Address: 8107 TESSA TERRACE E
City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32244

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: LAUREN CARR MGR 10/22/2008