

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004341

FILED
Mar 21, 2006
Secretary of State

Entity Name: LAUREL SPRINGS AT KERNAN LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2267 BASALT DRIVE EAST
JACKSONVILLE, FL 32246

New Principal Place of Business:

12187-4 BEACH BLVD
JACKSONVILLE, FL 32246

Current Mailing Address:

PO BOX 19393
JACKSONVILLE, FL 322459393 US

New Mailing Address:

12620-3 BEACH BLVD
#301
JACKSONVILLE, FL 32246 US

FEI Number: 59-3469124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARMSTRONG, VIVIAN
2267 BASALT DRIVE EAST
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

JARNUTOWSKI, SHERRIE
12620-3 BEACH BLVD
#301
JACKSONVILLE, FL 32246 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: SHERRIE JARNUTOWSKI

03/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARMSTRONG, VIVIAN
Address: 2267 BASALT DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP () Delete
Name: REID, LARRY
Address: 2236 BASALT DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32246

Title: S () Delete
Name: HELM, LORI
Address: 12190 BASALT DRIVE S.
City-St-Zip: JACKSONVILLE, FL 32246

Title: 2VP () Delete
Name: LUCAS, STEPHEN
Address: 5801 BAYOU GRANDE BLVD. NE
City-St-Zip: ST. PETERSBURG, FL 33703

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: T (X) Change () Addition
Name: KAUFMAN, TERES
Address: 12167 BASALT DRIVE S
City-St-Zip: JACKSONVILLE, FL 32246

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: VIVIAN ARMSTRONG

PRES

03/21/2006

Electronic Signature of Signing Officer or Director

Date