2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004350

FILED Jan 16, 2009 Secretary of State

Entity Name: JUBILEE ADDITION AT LPGA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 801 W. GRANADA BLVD 213 BAY PINES COURT ORMOND BEACH, FL 32174 303 ORMOND BEACH, FL 32174 **New Mailing Address: Current Mailing Address:** P.O. BOX 730096 ORMOND BEACH, FL 321730096 FEI Number: 59-3520117 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: HOOD, C. DAVID SMITH, HOOD, PERKINS 444 SEABREEZE BLVD., 9TH DAYTONA BEACH, FL 32118 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BLODGETT, BARBARA PICARILLO, LYDIA Name: Name: 260 GALA DR Address: 164 GALA CIRCLE Address: City-St-Zip: MIAMI, FL 33124 City-St-Zip: DAYTONA BEACH, FL 32124 Title: Title: () Delete () Change () Addition BOYLE, SHIELA Name: Name: Address: 255 GALA CIRCLE Address: City-St-Zip: DAYTONA BEACH, FL 32124 City-St-Zip: Title: () Delete Title: (X) Change () Addition GEGGIS, ANN GEGGIS, ANN Name: Name: Address: 281 GALA Address: 281 GALA City-St-Zip: DAYTONA BEACH, FL 32124 DAYTONA BEACH, FL 32124 City-St-Zip: Title: MGR Title: () Change () Addition () Delete JOHNSON, ROSELLE TUTTLE Name: Name: Address: 213 BAY PINES CT Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: () Delete Title: () Change (X) Addition HAHN, PAUL Name: Name: 208 GALA CIRCLE Address: Address: DAYTONA BEACH, FL 32124 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition RENTZEL, DON Name: Name: Address: Address: 115 GALA CIRCLE DAYTONA BEACH, FL 32124 City-St-Zip: City-St-Zip:

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: ROSELLE TUTTLE JOHNSON MGR 01/16/2009