

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005614

FILED
Apr 26, 2006
Secretary of State

Entity Name: OPPORTUNITY PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

569 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205

New Principal Place of Business:

569 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205 US

Current Mailing Address:

569 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205

New Mailing Address:

569 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205 US

FEI Number: 59-3587494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCARTHUR, W.A.
569 EDGEWOODS AVE S
JACKSONVILLE, FL US

Name and Address of New Registered Agent:

RAX CO.
50 N. LAURA STREET, SUITE 3300
JACKSONVILLE, FL 32202 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: KENNETH M. KEEFE, JR., VICE PRESIDENT

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCARTHUR, W.A.
Address: 569 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

Title: VPD () Delete
Name: MCARTHUR, D.W. III
Address: 569 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

Title: STD () Delete
Name: GAUPIN, W.T.
Address: 569 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCARTHUR, WILLIAM A
Address: 569 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: V (X) Change () Addition
Name: HENDRIX, CHARLES N
Address: 569 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: STD (X) Change () Addition
Name: GAUPIN, W T
Address: 569 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205 US

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: WILLIAM A. MCARTHUR

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04/26/2006

Electronic Signature of Signing Officer or Director

Date