

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006877

FILED
Apr 15, 2009
Secretary of State

Entity Name: CUNNINGHAM CREEK PLANTATION PARK ASSOCIATION, INC.

Current Principal Place of Business:

913 ALIZON STREET
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

PO BOX 600346
JACKSONVILLE, FL 322600346

New Mailing Address:

FEI Number: 59-3592028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HIGLEY, DOUGLAS D MR.
529 N. BRIDGESTONE AVE
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

ALDRIDGE, PAULINE
496 N. BRIDGESTONE AVE
JACKSONVILLE, FL 32259 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: PAULINE ALDRIDGE

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HIGLEY, DARRELL PRESIDE
Address: 529 N. BRIDGESTONE AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: ALDRIDGE, CHRIS
Address: 496 N. BRIDGESTONE
City-St-Zip: JACKSONVILLE, FL 32259

Title: T () Delete
Name: MCDONALD, JAMES
Address: 548 N. BRIDGESTONE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: DACLOUCHE, WENDY
Address: 476 N. BRIDGESTONE AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: S () Delete
Name: LOOR, KITTY
Address: 485 N. BRIDGESTONE AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALDRIDGE, PAULINE PRESIDE
Address: 496 N. BRIDGESTONE AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D (X) Change () Addition
Name: ALDRIDGE, CHRIS
Address: PO BOX 600346
City-St-Zip: JACKSONVILLE, FL 32260

Title: T (X) Change () Addition
Name: HIGLEY, DOUGLAS D
Address: PO BOX 600346
City-St-Zip: JACKSONVILLE, FL 32260

Title: D (X) Change () Addition
Name: DACLOUCHE, WENDY
Address: PO BOX 600346
City-St-Zip: JACKSONVILLE, FL 32259

Title: D (X) Change () Addition
Name: LOOR, KITTY
Address: PO BOX 600346
City-St-Zip: JACKSONVILLE, FL 32260

Title: D () Change (X) Addition
Name: STIEGELMAN, LAURA
Address: PO BOX 600346
City-St-Zip: JACKSONVILLE, FL 32260

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: DOUGLAS DARRELL HIGLEY

T

04/15/2009

Electronic Signature of Signing Officer or Director

Date