## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000095516

Entity Name: DARDEN PROPERTY, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

5215 HIGHWAY AVE., STE. 101 8947 SNELLGROVE AVENUE E JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32220

Current Mailing Address: New Mailing Address:

5215 HIGHWAY AVE., STE. 101 8947 SNELLGROVE AVENUE E JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32220

FEI Number: 20-1287405 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:

WILLIAMS, RONALD D
5215 HIGHWAY AVE., STE. 101
JACKSONVILLE, FL 32210 US
WILLIAMS, JOHN R SR
8947 SNELLGROVE AVENUE E
JACKSONVILLE, FL 32220 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: JOHN R. WILLIAMS, SR. 04/20/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition WILLIAMS, RONALD D WILLIAMS, JOHN R SR Name: Name: 5215 HIGHWAY AVE., STE. 101 Address: 8947 SNELLGROVE AVENUE E Address: JACKSONVILLE, FL 32220 City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

Title: D ( ) Delete Title: VP (X) Change ( ) Addition Name: WILLIAMS, JOHN R SR. Name: KELLY, KAREN

 Address:
 5215 HIGHWAY AVE., STE. 101
 Address:
 8939 SNELLGROVE AVENUE E

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 JACKSONVILLE, FL 32220

Title: ( ) Delete Title: VP ( ) Change (X) Addition

 Name:
 Name:
 BESSENT, SHÂRON

 Address:
 Address:
 2344 JONES ROAD

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32220

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN R. WILLIAMS, SR. P 04/20/2006