

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S38673

FILED
Apr 30, 2004
Secretary of State

Entity Name: EAGLE HARBOR AT FLEMING ISLAND, INC.

Current Principal Place of Business:

1880 EAGLE HARBOR PKWY
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

14700 VILLAGE SQ. PL.
MIDLOTHIAN, VA 23112

New Mailing Address:

FEI Number: 52-1725258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEAD, ROBERT J JR
1329 KINGSLEY AVE.
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FENCHUK, GARY W
Address: 13704 BEECHWOOD POINTE ROAD
City-St-Zip: MIDLOTHIAN, VA 23112

Title: VS () Delete
Name: ARROWSMITH, ROGER
Address: 1571 SOUTH SHORE DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: AS () Delete
Name: BOWMAN, BENJIE F
Address: 2804 S. 2ND STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: S () Delete
Name: PEARSON, KATHY
Address: 14700 VILLAGE SQUARE PL
City-St-Zip: MIDLOTHIAN, VA 23112

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: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATHRYN PEARSON

S

04/30/2004

Electronic Signature of Signing Officer or Director

Date