

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007156

Entity Name: CORNELL ONE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1671 FRANCIS AVENUE
ALTANTIC BEACH, FL 32233**Current Mailing Address:**1671 FRANCIS AVENUE
ALTANTIC BEACH, FL 32233**FEI Number: 75-3044498****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BALL, HAYWOOD M
50 NORTH LAURA STREET
SUITE 2925
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	BORDERS, EDWIN
Address	1494 EAST BLUE HERON LANE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	D
Name	LAMM, MARY-PARKER
Address	10328 LOBLOLLY LANE SOUTH
City-State-Zip:	JACKSONVILLE FL 32246

Title	D
Name	MARCELLO, RALPH
Address	152 WATER OAK DRIVE
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	P
Name	TACKETT, MARLENE
Address	1101 CORNELL LANE
City-State-Zip:	ATLANTIC BEACH FL 32233

Title	T
Name	KOMOROSKI, RENEE
Address	1103 CORNELL LANE
City-State-Zip:	ATLANTIC BEACH FL 32233

I hereby 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 all other like empowered.

SIGNATURE: RENEE KOMOROSKI**TREASURER****03/09/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date