2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2014
Secretary of State
CC7688419371

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Entity Name: ANCIENT CITY PLAZA OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O MAY MANAGEMENT SERVICES, INC
5455 A1A SOUTH
ST AUGUSTINE, FL 32080

Current Mailing Address:

C/O MAY MANAGEMENT SERVICES, INC
5455 A1A SOUTH
ST AUGUSTINE, FL 32080

FEI Number: 20-2047064

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC
5455 A1A SOUTH
SUITE 3
ST AUGUSTINE, FL 32080 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	Title	TREASURER
Name	GEORGE, NEIL	Name	SCOTT, STANELY
Address	5455 A1A SOUTH	Address	5455 A1A SOUTH
City-State-Zip:	ST AUGUSTINE FL 32080	City-State-Zip:	ST AUGUSTINE FL 32080
Title	S	Title	VP
Name	STAFFORD, JAMES	Name	BRANDON, RICHARD
Address	5455 A1A SOUTH	Address	5455 A1A SOUTH
City-State-Zip:	ST AUGUSTINE FL 32080	City-State-Zip:	ST AUGUSTINE FL 32080
Title	P		
Name	O'CONNELL, PATRICK		
Address	5455 A1A SOUTH		
City-State-Zip:	ST AUGUSTINE FL 32080		

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: PATRICK O'CONNELL PRESIDENT 03/14/2014

Electronic Signature of Signing Officer/Director Detail — Date