

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 749256

1. Entity Name

SPINNAKERS REACH CONDOMINIUM ASSOCIATION, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90035 019 ****61.25

Principal Place of Business

10036 SAWGRASS DR
PONTE VEDRA BCH FL 32082
US

Mailing Address

PO BOX 1159
PONTE VEDRA BCH FL 32004-1159
US

2. Principal Place of Business
2180 W SR 434

3. Mailing Address
2180 W SR 434

Suite, Apt. #, etc.

STE 5000

Suite, Apt. #, etc.

STE 5000

City & State

LONGWOOD FL

City & State

LONGWOOD FL

4. FEI Number

59-2090100

Applied For

Not Applicable

Zip

32779

Country

US

Zip

32779

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUNCH, DONALD J
FOUR SEASONS MANAGEMENT
10036 SAWGRASS DR
PONTE VEDRA BCH FL 32082

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W SR 434 STE 5000
LONGWOOD FL 32779-5044

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GLEAVES, JAMES 746 SPINNAKER'S REACH ROAD PONCE VEDRA BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALLEN, JERI 756 SPINNAKERSREACH RD PT VERDA BCH FL 32082	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HAYES, VEOLA 2625 LIGHTHOUSE BEND DR. PONTE VEDRA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALCHLE, MARIE 739 SPINNAKER'S REACH ROAD PONTE VEDRA BEACH FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANDROFF, HOWARD 703 SPINNAKERS REACH ROAD PONTE VEDRA BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	I KUNZ, KARL 735 SPINNAKERS REECH RD PT VEDRA BCH FL 32082	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 746 SPINNAKERS REACH RD PONTE VEDRA FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition D 756 SPINNAKERS REACH RD PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition VD PO BOX 2058 PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition PD MIREILLE THRELKEL 716 SPINNAKERS REACH RD PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)