

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 16, 2001 08:00 AM****Secretary of State****DOCUMENT # 749256**1. Entity Name
SPINNAKERS REACH CONDOMINIUM ASSOCIATION, INC.Principal Place of Business
716 SPINNAKERS REACH ROAD
PONTE VEDRA BEACH FL 32082 USMailing Address
716 SPINNAKERS REACH ROAD
PONTE VEDRA BEACH FL 32082 US2. Principal Place of Business
4400 MARSH LANDING BLVD3. Mailing Address
4400 MARSH LANDING BLVDSuite, Apt. #, etc.
STE. # 3Suite, Apt. #, etc.
STE. # 3City & State
PONTE VEDRA BEACH FLCity & State
PONTE VEDRA BEACH FLZip Country
32082 USZip Country
32082 US4. FEI Number
59-2090100Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

0000
Name
LOVELAND STEPHEN C
Street Address (P.O. Box Number is Not Acceptable)
4400 MARSH LANDING BLVD
STE. # 3
City
PONTE VEDRA BEACH FL Zip Code
32082

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 **STEPHEN C. LOVELAND****03/16/2001**

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

(NOTE: Registered Agent signature required when reinstalling)

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 D ☐ Delete
NAME VANDROFF HOWARD
STREET ADDRESS 703 SPINNAKERS REACH ROAD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE SD ☒ Change ☐ Addition
NAME THOMAS ROY
STREET ADDRESS 744 SPINNAKERS REACH ROAD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE PD ☐ Delete
NAME MIREILLE THRELKEL
STREET ADDRESS 716 SPINNAKERS REACH RD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE D ☒ Change ☐ Addition
NAME WALCHLE BART
STREET ADDRESS 739 SPINNAKERS REACH RD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE VD ☐ Delete
NAME HAYES VEOLA
STREET ADDRESS P.O. BOX 2058
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE TD ☒ Change ☐ Addition
NAME THRELKEL MIREILLE
STREET ADDRESS 716 SPINNAKERS REACH RD.
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE D ☐ Delete
NAME ALLEN JERI
STREET ADDRESS 756 SPINNAKERS REACH RD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE VPD ☒ Change ☐ Addition
NAME ALLEN JERI
STREET ADDRESS 756 SPINNAKERS REACH RD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE SD ☐ Delete
NAME GLEAVES JAMES
STREET ADDRESS 746 SPINNAKER
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE PD ☒ Change ☐ Addition
NAME GLEAVES JAMES
STREET ADDRESS 746 SPINNAKER
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: JAMES GLEAVES**P****03/16/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)