

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90005 017 ****61.25

DOCUMENT # 766056

1. Entity Name

FOREST RIDGE VILLAGE CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business

Mailing Address

**2413 FIRST AVE.
 FERNANDINA BCH. FL 32034-2347**

**2413 FIRST AVE.
 FERNANDINA BCH. FL 32034-2347**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2552425

Applied For

Not Applicable

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

**TOMASSETTI, JEFFERY A
 406 ASH STREET
 FERNANDINA BEACH FL 32034**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 ☐ Delete
 NAME **T**
 STREET ADDRESS **PAQUETTE, ALAN**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #N-8
 FERNANDINA BEACH FL 32034**

TITLE ☒ Change ☐ Addition
 NAME **T**
 STREET ADDRESS **PAQUETTE, ALAN**
 CITY-ST-ZIP **2413 FIRST AVENUE, Unit N-8
 FERNANDINA BEACH, FL 32034**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **PURSER, VIVIAN**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #H-3
 FERNANDINA BEACH FL 32034**

TITLE ☐ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **PURSER, VIVIAN**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #H-3
 FERNANDINA BEACH, FL 32034**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **THOMPSON, CHARLIE**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #M-2
 FERNANDINA BEACH FL 32034**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **TAYLOR, DAVID H.**
 CITY-ST-ZIP **860 WHISPER COVE TRAIL
 JACKSONVILLE, FL 32221**

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **BLOUNT, MIKE**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #E-3
 FERNANDINA BEACH FL 32034**

TITLE ☒ Change ☐ Addition
 NAME **P**
 STREET ADDRESS **SACKETT, WANN**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT V-2
 FERNANDINA BEACH, FL 32034**

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **BEAMER, PAT**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #V-4
 FERNANDINA BEACH FL 32034**

TITLE ☒ Change ☐ Addition
 NAME **S**
 STREET ADDRESS **EDWARDS, BARBARA B**
 CITY-ST-ZIP **2413 FIRST AVENUE UNIT V-1
 FERNANDINA BEACH, FL 32034**

TITLE ☐ Delete
 NAME **VP**
 STREET ADDRESS **CORN, GARY**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #E-6
 FERNANDINA BEACH FL 32034**

TITLE ☐ Change ☐ Addition
 NAME **VP**
 STREET ADDRESS **CORN, GARY**
 CITY-ST-ZIP **2413 FIRST AVENUE, UNIT #E-6
 FERNANDINA BEACH, FL 32034**

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. 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:

VIVIAN PURSER, DIRECTOR

Jan. 11, 2002

904-261-6699

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)