## **NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## FILED Jan 27, 2003 8:00 am Secretary of State

DOCUMENT	# //	0000	0000022
1 Entity Name	/ '		,

1. Entity Nar	MENT#/ΥΟΟΟΟ TH FLORIDA LAND TRI		/			01-27-2003 90218	036 ****61.25	
	DO NOT WRITE	IN THIS SI	PAC	E	į		·	
Principal Place of Business     Address     4400 MARSH LANDII		JDING	BIVD					
Suite, Apt. #, etc. Suite, Apt. #, etc.		· ·	DEVID.		DO NOT WRITE IN THIS SPACE			
City & State  City & State  PONTE VEDRA BE		EACH	 1, FL	4. FEI Number	59-3609-167			
Zip	Country	<sup>Zip</sup> 32082	Zip Country		5. Certificate of S	5. Certificate of Status Desired		
<u> </u>	Control Contro	<u> </u>	<u> </u>	Name MC		ress of Current Registered	Agent	
DO NOT WRITE IN THIS SPACE			Street Address (P.O. Box Number is Not Acceptable)					
			225 LAMPLIGHTER LAND					
		·	City PONTE VEDRA BEACH, FL Zip Code 32082					
SIGNATURE	Signature, typed or printed name of registered agent a FEE IS \$61.25 Initial or Amended UBR	9. Election Can Trust Fund C	npaign F	inancing	\$5.00 May Be Added to Fees	Make Check Florida Departr	-	
10.	OFFICERS AND DIR					<u> </u>		
NAME STREET ADDRESS CITY-ST-ZIP	PD MC QUILKIN, WILLIA 2250 LAMPLIGHTER LAND PONTE VEDRA BEACH, F	)		I			CR2E037B (12/02)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME 8100 NATIONS WAY  STREET ADDRESS JACKSONVILLE, FL 32256			I .			CR2E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOGGS, AIMEE 814A, HWY. A1A NORHT, PONTE VEDRA BEACH, F			1	ĎΟ	NOT WRIT	E	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	18 OCEAN DRIVE ORESS ST. AUGUSTINE, FLORIDA 32080				IN <sup>-</sup>	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANKLAND, THOMA 9715 GATE PARKWAY NO JACKSONVILLE, FL 32246	rth .		1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LISENBY, LYNN 1804 WARDS LANDING CT FLEMING ISLAND, FL 3200	)3 	CITY-	T ADDRESS ST-ZIP				
12. I hereby of indicated	certify that the information supplied with to on this report or supplemental report is	his tiling does not qualify for rue and accurate and that m	the exen y signati	nption stated in ure shall have t	n Section 119.07(3)(i), FI the same legal effect as	orida Statutes. I further certify if made under oath; that I am	that the information an officer or director	

## NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

- PAGE 2 OF 2

DOCUMENT #  1. Entity Name  NORTH FLORIDA LAND TRUST				Sant 377				
DO NOT WRITE	IN THIS S	PACE						
2. Principal Place of Business	3. Mailing Address	NDING BLVD						
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.		TOMO DEVE.		DO NOT WRITE IN THIS	SPACE			
SUITE 4   City & State   City & State   PONTE VEDRA BEAC		REACH FI	4. FEI Number	59_36/19_16/				
Zip Country	Zip 32082	Zip Country		5 Certificate of Status Desired \$8.75 Additional				
And the second of the second o	32062	<u> </u>	7Name and Addi	ess of Current Registere	Fee Required			
				QUILKIN, WILLIAM JR				
IN THIS SPACE			225 LAMPLIGHTER LAND					
		L	ITE VEDRA BEA		Zip Code			
The above named entity submits this statement for the obligations of registered agent.	the purpose of changing its	<del></del> _			32002			
SIGNATURE  Signature, typed or printed name of registered agent a  FEE IS \$61,25  Initial or Amended UBR		E: Registered Agent signature re	\$5.00 May Be Added to Fees		k Payable to tment of State			
10. OFFICERS AND DIR TITLE D KNAPP, ELLEN (LIN)	ECTORS	TITLE			6			
NAME STREET ADDRESS CITY-ST-ZIP  132 LANTERN WICK PLACE PONTE VEDRA BEACH, F		NAME STREET ADDRESS CITY-ST-ZIP			CR2E037R (12)(2)			
AME 149 LANTERN WICK PLACE REET ADDRESS PONTE VEDRA BEACH, FL 32082		TITLE NAME STREET ADDRESS CITY-ST-ZIP			i de la companya de l			
TITLE NAME		TITLE NAME		78-01 , , , , , , , , , , , , , , , , , , ,				
STREET ADDRESS:		- STREET ADDRESS	DO	NOT WRI	TE			
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS		THIS SPACE				
CITY-ST-ZIP		CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-2IP		TITLE 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)(i), Florida Statutes. I further certify that the information indicated on this report or supplier and the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trastic amplitudes because the population of the corporation or the receiver of trastic amplitudes because the population of the corporation or the receiver of trastic amplitudes the population of the corporation or the receiver of trastic amplitudes the population of the corporation or the receiver of trastic amplitudes the population of the corporation or the receiver of trastic amplitudes the population of the corporation or the receiver of trastic amplitudes the population of the corporation or the receiver of trastic amplitudes. The population of the corporation or the receiver of trastic amplitudes the information section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of the corporation or the receiver of trastic amplitudes the information section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that t								

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