2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2003 8:00 am
Secretary of State
06-05-2003 90132 044 ****61.25

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DOCUMENT # N00000000084

1. Entity Name
ROYAL ST. AUGUSTINE PARCEL OWNERS ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
~~3117 MOHAVE WAY~~ ~~JACKSONVILLE FL 32259~~	~~3117 MOHAVE WAY~~ ~~JACKSONVILLE FL 32259~~

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
200 Business Park Circle	200 Business Park Circle
Suite, Apt. #, etc.: Suite 101	Suite, Apt. #, etc.: Suite 101
City & State: St. Augustine, FL	City & State: St. Augustine, FL
Zip: 32095-8887 Country: USA	Zip: 32095-8887 Country: USA

4. FEI Number ~~59-3631443~~ ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, PATRICK T
~~3117 MOHAVE WAY~~
~~JACKSONVILLE FL 32259~~

7. Name and Address of New Registered Agent

Name: PATRICK T. MURPHY
Street Address (P.O. Box Number is Not Acceptable): 200 BUSINESS PARK CIR. SUITE 101
City: ST. AUGUSTINE FL Zip Code: 32095

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MURPHY, PATRICK T 3117 MOHAVE WAY JACKSONVILLE FL 32259	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 200 Business Park Circle, Suite 101 St. Augustine, FL 32095-8887
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD MONTGOMERY, MITCHELL R 9440 PHILIPS HWY STE 9 JACKSONVILLE FL 32256	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD MURPHY, MICHAEL A 3117 MOHAVE WAY JACKSONVILLE FL 32259	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 200 Business Park Circle, Suite 101 St. Augustine, FL 32095-8887
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CR2E037 (10/02)

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 REQUIRED