

FILE-NOW: FILING FEE IS \$61.25

FILED
Apr 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N12981 (9)
1. Corporation Name
FAIRFIELD PONTE VEDRA ASSOCIATION, INC.



Principal Place of Business 10036 SAWGRASS DRIVE 3 PONTE VEDRA BEACH FL 32082 US	Mailing Address P.O. BOX 1159 PONTE VEDRA BEACH FL 32004 US
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3. Date Incorporated or Qualified
01/16/1986

4. FEI Number 59-2628195	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 4889-5 SAN JOSE BLVD	2a. Mailing Address 26 PO DRAWER 1939
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
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6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

City & State 23 JACKSONVILLE, FL	City & State 28 PONTE VEDRA BEACH, FL
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7. Is this nonprofit corporation a homeowners association?
 Yes No

Zip 24 32257	Country 25 USA	Zip 29 32004	Country 30 USA
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8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**MUNCH, DONALD
FOUR SEASONS MANAGEMENT
10036 SAWGRASS DR., SUITE 3
PONTE VEDRA BEACH FL 32082**

10. Name and Address of New Registered Agent
81 Name **BRYAN K. CANTRELL**
82 Street Address (P.O. Box Number is Not Acceptable)
4889-5 SAN JOSE BLVD
83
84 City **JACKSONVILLE** FL 85 Zip Code **32257**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Bryan K. Cantrell* DATE **4/21/98**

12. OFFICERS AND DIRECTORS		
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BARNCASTLE, MINERVA	
STREET ADDRESS	121 GLEN COVE PLACE	
CITY-ST-ZIP	PONTE VEDRA FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	PRITCHETT, JANET C.	
STREET ADDRESS	122 GLEN EAGLES COURT	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	ROHBAUGH, JAMES	
STREET ADDRESS	129 TOURNAMENT RD.	
CITY-ST-ZIP	PONTE VEDRA FL	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	MICKLEY, BRIAN	
STREET ADDRESS	148 NATURES ISLE DR.	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LEUSCHEN, GARY	
STREET ADDRESS	206 TOURNAMENT RD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	CORSER, HAROLD	
STREET ADDRESS	829 TOURNAMENT ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

All attached

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *David S. Haddad* DATE: **April 8, 1998** 285-9124

CP2E037 (10/97)

WILLIAM TUNSTALL DP
BAY ISLAND COVE
116 GLEN COVE PLACE
PONTE VEDRA BEACH, FL 32082
PRESIDENT
285-8464

DAVID V. STODDARD T
GLEN EAGLES
129 GLEN EAGLES CT
PONTE VEDRA BEACH, FL 32082
TREASURER
285-9185

CORNELIUS WHITAKER D
AZALEA POINT IIA
121 GARDEN GATE DRIVE
PONTE VEDRA BEACH, FL 32082
DIRECTOR
273-4113

JOHN KEARNEY D
AZALEA POINT IID
101 FORMOSA PLACE
PONTE VEDRA BEACH, FL 32082
DIRECTOR
273-1988

LISA ELWELL D
AZALEA POINT IIB
125 BOUGANVILLE DRIVE
PONTE VEDRA BEACH, FL 32082
DIRECTOR
273-4538

HAROLD CHANDLER V
AZALEA POINT IIC
125 CRAPE MYRTLE DR
PONTE VEDRA BEACH, FL 32082
VICE PRESIDENT
273-6395

GEORGE ELY S
CLUB COTTAGES
830 TOURNAMENT ROD
PONTE VEDRA BEACH, FL 32082
SECRETARY
285-6629

RICHARD DUBROC D
AZALEA POINT I
137 AZALEA POINT DR. N
PONTE VEDRA BEACH, FL 32082
DIRECTOR
273-3106

BARBARA MEYERS D
POOL VILLAS
103 HARBOR ISLAND CT
PONTE VEDRA BEACH, FL 32082
DIRECTOR
285-6510

JOSEPH MITCHELL D
CARRIAGE HOUSES
125 BURNING PINES CT
PONTE VEDRA BEACH, FL 32082
DIRECTOR
285-9215