

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 02, 2001 8:00 am**  
**Secretary of State**

02-01-2001 90087 048 \*\*\*\*61.25

**DOCUMENT # N13799**

1. Entity Name

**THE CHAPEL AT SAWGRASS, INC.**

Principal Place of Business

**SAWGRASS C C  
PONTE VEDRA BEACH FL 32004  
US**

Mailing Address

**P.O. BOX 664  
PONTE VEDRA BEACH FL 32004  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-2719600**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**



DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

**LEWIS, BILL  
4600 MIDDLETON PARK CIR  
APT D646  
JACKSONVILLE FL 32224**

7. Name and Address of New Registered Agent

Name

**DOLAGHAN, JOHN**

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

**2020 OAK HAMMOCK DRIVE**

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

*John Dolaghan* 25 Feb 01

**JOHN DOLAGHAN**

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: **D**  Delete  
NAME: **DOLAGHAN, JOHN**  
STREET ADDRESS: **2020 OAK HAMMOCK DRIVE**  
CITY-ST-ZIP: **PONTE VEDRA BEACH FL**

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE: **D**  Delete  
NAME: **LEWIS, BILL**  
STREET ADDRESS: **16 LAKE JULIA DRIVE**  
CITY-ST-ZIP: **PONTE VEDRA BEACH FL**

TITLE: **D**  Change  Addition  
NAME: **LEWIS, BILL**  
STREET ADDRESS: **16 LAKE JULIA DRIVE**  
CITY-ST-ZIP: **JACKSONVILLE, FL 32224**

TITLE: **D**  Delete  
NAME: **BOUZEOS, DEAN**  
STREET ADDRESS: **254 CHARLEMAGNE CR**  
CITY-ST-ZIP: **PONTE VEDRA BEACH FL 32082**

TITLE: **D**  Change  Addition  
NAME: **BOUZEOS, DEAN**  
STREET ADDRESS: **1312 SYLVIE LANE**  
CITY-ST-ZIP: **ST. AUGUSTINE, FL 32085**

TITLE:  Delete  
NAME:  Delete  
STREET ADDRESS:  Delete  
CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
NAME: **SEE ATTACHED**  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
NAME:  Delete  
STREET ADDRESS:  Delete  
CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
NAME:  Delete  
STREET ADDRESS:  Delete  
CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

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:

*John Dolaghan*  
**SIGNATURE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 Jan 01

DATE

904-285-2401

DAYTIME PHONE #

CR2E037 (10/00)

THE CHAPEL AT SAWGRASS  
P.O. Box 664  
Ponte Vedra Beach, FL 32004

Attachment  
0# N13799  
~~0# N13799~~  
28412

Additional Directors

D  
Virginia A. Coward  
2413 Brittany Court  
Ponte Vedra Beach, FL 32082

T/D  
Samuel L. Ertel  
2644 Long Boat Court South  
Ponte Vedra Beach, FL 32082

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S/D  
Ann Pruner  
15113 Birkdale Lane  
Ponte Vedra Beach, FL 32082

D  
Ruth Ann Smith  
1601 Ocean Drive South  
Jacksonville Beach, FL 32250

D  
Kathy J. Summerall  
2301 Greenside Court  
Ponte Vedra Beach, FL 32082

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