

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

0069261

DOCUMENT # N15386

04-04-2001 90014 045 ****61.25

1. Entity Name

THE CORMORANT LANDING OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2215 EAST STATE ROAD
 YULEE FL 32097
 US

PO BOX 1987
 YULEE FL 32041-1987
 US

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

59-2386851

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POWELL, TERRELL J
2215 EAST STATE ROAD 200
YULEE FL 32097

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 NAME	D BONLUG, KATHERINE	<input type="checkbox"/> Delete
STREET ADDRESS	12232 LASHBROOK CT	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	PD OLSON, SONIA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	12216 REEDPOND DR W	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	TD REZSONYA, JOHN	<input type="checkbox"/> Delete
STREET ADDRESS	12158 CATTAIL LANE	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	PD WEBB, SANDRA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	3659 MOSSWOOD COURT	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	D TUROWSKI, GERRY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	12226 LASHBROOK CT	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	SD MATHIS, DONNA	<input type="checkbox"/> Delete
STREET ADDRESS	3746 CATTAIL DR., S	
CITY-ST-ZIP	JACKSONVILLE FL 32223	

TITLE NAME	SD BOWLUS, KATHARINE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	VD KERSTEN, JAMES	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	12253 OKAWANA CT	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	D RAHMES, DENISE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	12222 CATTAIL DR W	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	D CORRADO, CHERYL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3756 REEDPOND DR N	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE NAME	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: *Donna Mathis*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/01

Date

904/225-9070

Daytime Phone #

CR2E037 (10/00)

N15386
737006



**Property
Management**
Systems, Inc.

March 30, 2001

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: *Correct FEI Number for The Cormorant Landing Owners
Association, Inc.*

To whom it may concern,

*Please change your records to reflect the correct FEI
number for The Cormorant Landing Owners Association, Inc.,
Document # N15386. The correct number in block 4 should be
59-2735627. (Enclosed is a copy of the notice from the
Internal Revenue Service indicating the correct number.)*

*If you have any questions regarding this matter, please
contact me at (904) 225-9070 or (904) 646-4911.*

Sincerely,

A handwritten signature in cursive script that reads "Gerry Bradley".

Gerry Bradley, Accounting Department
PROPERTY MANAGEMENT SYSTEMS, INC.
As Managers For
THE CORMORANT LANDING OWNERS
ASSOCIATION, INC.

/gb

**CORPORATE OFFICE
& ACCOUNTING**

YULEE

2215 East S.R. 200
Post Office Box 1987
Yulee, FL 32041-1987
(904) 225-9070
Fax (904) 225-0790

JACKSONVILLE

(904) 646-4911



N15386
737006

Department of the Treasury
Internal Revenue Service

ATLANTA, GA 39901

In reply refer to: 5945414028
Mar. 20, 2001 LTR 147C
59-2735627 000000 00

00518

CORMORANT LANDING OWNERS ASSOCIA-
TION INC
PO BOX 1987
YULEE FL 32041-1987870

Employer Identification Number: 59-2735627
IRS Control Number:

Dear Taxpayer:

We received your request dated Mar. 06, 2001 asking us to verify your employer identification number (EIN) and name.

Your employer identification number (EIN) is 59-2735627. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence or documents.

If you have any questions, please call us toll free at 1-800-829-1040. If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

Department of the Treasury
Internal Revenue Service

#N15386
737006

5945414028

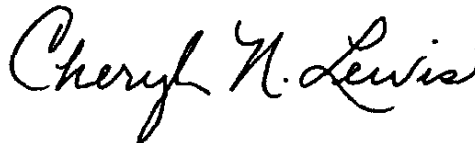
Mar. 20, 2001 LTR 147C
59-2735627 000000 00

00519

CORMORANT LANDING OWNERS ASSOCIA-
TION INC
PO BOX 1987
YULEE FL 32041-1987870

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,



Cheryl N. Lewis
Chief, Taxpayer Relations

Enclosure(s):
Copy of this letter