

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N21133

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

GRAN PARK MAINTENANCE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1048
ST. AUGUSTINE FL 32085-1048

P.O. BOX 1048
ST. AUGUSTINE FL 32085-1048



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10151 Deerwood Park Blvd.

3. Mailing Address

10151 Deerwood Park Blvd.

Suite, Apt. #, etc.

Building 100, Suite 330

Suite, Apt. #, etc.

Building 100, Suite 330

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-2116258

Applied For

Not Applicable

Zip
32256

Country
U.S.

Zip
32256

Country
U.S.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EDDINS, HEIDI J
ONE MALAGA ST
SAINT AUGUSTINE FL 32084

7. Name and Address of New Registered Agent

Name
Karl B. Hanson III

Street Address (P.O. Box Number is Not Acceptable)
10151 Deerwood Park Blvd.

Building 100, Suite 330

City
Jacksonville

FL

Zip Code
32256

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

KARL B. HANSON III, SECRETARY

7-14-00

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
After September 13, 2000 min. will be \$236.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
ANESTIS, R W
ONE MALAGA STREET
SAINT AUGUSTINE FL 32084 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
MACSWAIN, R F
ONE MALAGA ST
SAINT AUGUSTINE FL 32084 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
WEST, G P
1650 PRUDENTIAL DRIVE
JACKSONVILLE FL Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPSD
EDDINS, HEIDI J
ONE MALAGA ST
SAINT AUGUSTINE FL 32084 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
G. John Carey
10151 Deerwood Park Blvd., Bldg 100, Ste 330
Jacksonville, FL 32256 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Lewis W. Graham, Jr.
10151 Deerwood Park Blvd., Bldg 100, Ste 330
Jacksonville, FL 32256 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
Karl B. Hanson III
10151 Deerwood Park Blvd., Bldg 100, Ste 330
Jacksonville, FL 32256 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Melinda Thompson
10151 Deerwood Park Blvd., Bldg 100, Ste 330
Jacksonville, FL 32256 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Change Addition

TITLE
NAME
STREET ADDRESS
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:

G. JOHN CAREY 7.17.00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(904) 279-3132

Daytime Phone #

03/03/00 90064 001 2456