

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


FILED

03 MAR -6 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N2 9536**

1. Entity Name
FAIRFIELD'S BAY ISLAND COVE



DO NOT WRITE IN THIS SPACE

700013991157
03/12/03--01043--029 **122.50

2. Principal Place of Business
9889-1 SAN JOSE BLVD
Suite, Apt. #, etc.

3. Mailing Address
9889-1 SAN JOSE BLVD
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
JACKSONVILLE FL

City & State
JACKSONVILLE FL

Zip
32257 Country
USA

Zip
32257 Country

4. FEI Number
59-2965064

Applied For
 Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
NOREEN CANTRELL

Street Address (P.O. Box Number is Not Acceptable)
9889-1 SAN JOSE BLVD

City
JACKSONVILLE FL Zip Code
32257

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FEE IS \$61.25
Initial or Amended UBR

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BILL TUNSTALL 115 GLEN COVE PL PONTE VEDRA FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WILLIAM FERGUSON 104 BAY HILL CT PONTE VEDRA FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ENIGI PELLETIER 110 BAY HILL CT PONTE VEDRA FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BILL SHAVEL 115 GLEN COVE PL PONTE VEDRA FL 32082
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CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Wilee P. Tunstall **2/27/03** **904-268-0055**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

N29536



"Discover the Difference"

February 27, 2003

Department of State
P.O. Box 1500
Tallahassee, FL 32303-1500

Re: FAIRFIELD'S BAY ISLAND COVE

Gentlemen:

Enclosed please find our check in the amount of \$122.50 for annual fees for 2002 & 2003.

It was discovered this year when we did not receive a renewal form that it was not done last year either. In looking at the records on sunbiz.org I see that the mailing address of P.O. Drawer 1439 was incorrect.

Please reinstate as soon as possible. Please contact me at (904)268-0035 should there be any problems or if you should require any additional information.

Sincerely,

A handwritten signature in black ink, appearing to read "Noreen", is written over a horizontal line.

Noreen M. Cantrell
Property Manager
Fairfields Bay Island Cove, Inc.