

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003524

FILED
Apr 15, 2009
Secretary of State

Entity Name: PONTE VEDRA LAKES BUSINESS PARK ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATION MANAGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

ASSOCIATION MANAGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 59-3221739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATION MANAMGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWER, DARBY
Address: 238 PONTEVEDRA PARK DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DVP () Delete
Name: BOWMAN, TODD
Address: 1500 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: DST () Delete
Name: PATEL, ANIL
Address: 120 PONTE VEDRA PARK DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARBY BROWER

Electronic Signature of Signing Officer or Director

P

04/15/2009

Date