

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000004384

FILED  
Apr 17, 2002 8:00 AM  
Secretary of State

**Entity Name:** HARBOUR ISLAND AT MARSH LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 MARSH LANDING BLVD  
SUITE 3  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

4400 MARSH LANDING BLVD  
SUITE 3  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 59-3234370      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MELCHING, STEPHEN D  
4400 MARSH LANDING BLVD  
SUITE 3  
PONTE VEDRA BEACH, FL 32082

**Name and Address of New Registered Agent:**

TREADWELL, FRANK E  
1548 THE GREENS WAY  
SUITE 4  
JACKSONVILLE BEACH, FL 32250

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: FRANK E. TREADWELL      04/17/2002  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: FLETCHER, PAUL Z  
Address: 4400 MARSH LANDING BLVD STE 3  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VTD      ( ) Delete  
Name: MELCHING, STEPHEN D  
Address: 4400 MARSH LANDING BLVD STE 3  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SD      ( ) Delete  
Name: HUTCHINSON, FRANCES F  
Address: 4400 MARSH LANDING BLVD STE 3  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VTD      (X) Change ( ) Addition  
Name: TREADWELL, FRANK E  
Address: 4400 MARSH LANDING BLVD STE 3  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL Z. FLETCHER      PD      04/17/2002  
Electronic Signature of Signing Officer or Director      Date