

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90327 005 ****61.25

DOCUMENT # N96000004757

1. Entity Name

DRAYTON PLACE OWNERS ASSOCIATION, INC.



Principal Place of Business

**SIGNATURE REALTY
9889-1 SAN JOSE BLVD
JACKSONVILLE FL 32257
US**

Mailing Address

**9889-1 SAN JOSE BLVD
JACKSONVILLE FL 32257
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 **59-3425853**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CANTRELL, BRYAN
9889-1 SAN JOSE BLVD
JACKSONVILLE FL 32257**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	PEREZ, JOSE	
STREET ADDRESS	12216 RUTH LAWN COURT	
CITY-ST-ZIP	JACKSONVILLE FL 32224	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	DOWNEY, JERRY	
STREET ADDRESS	4304 RIPKEN CIRCLE EAST	
CITY-ST-ZIP	JACKSONVILLE FL 32224	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	HART, GARY	
STREET ADDRESS	4352 RIPKEN CIRCLE WEST	
CITY-ST-ZIP	JACKSONVILLE FL 32224	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	UTLEY, ANTHONY	
STREET ADDRESS	12206 GEHRIG DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32224	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	YOUNG, SHERRI	
STREET ADDRESS	12205 ANTONI COURT	
CITY-ST-ZIP	JACKSONVILLE FL 32224	
TITLE	D	<input type="checkbox"/> Delete
NAME	COMPTON, COREY	
STREET ADDRESS	4164 RIPKEN CIRCLE WEST	
CITY-ST-ZIP	JACKSONVILLE FL 32224	

TITLE	PRESIDENT/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RON VAN	
STREET ADDRESS	4248 RIPKEN CIR E	
CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE	VICE PRESIDENT/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COREY COMPTON	
STREET ADDRESS	4164 RIPKEN CIR W	
CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE	SECRETARY/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BILL YAEGER	
STREET ADDRESS	4240 RIPKEN CIR E	
CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE	TREASURER/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MICHAEL HOWARD	
STREET ADDRESS	12173 RIPKEN CIR N	
CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE	DIRECTOR/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SWANSON RICHARDS	
STREET ADDRESS	4156 RIPKEN CIR W	
CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

Corey Compton
SIGNATURE REQUIRED

4/9/03 (904) 641-4343

CR2E037 (10/02)