

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008370

**Entity Name:** JULINGTON PLAZA OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1 INDEPENDENT DRIVE, SUITE 114  
JACKSONVILLE, FL 32202-5019

**Current Mailing Address:**

1 INDEPENDENT DRIVE, SUITE 114  
JACKSONVILLE, FL 32202-5019 US

**FEI Number: 80-0062119**

**Certificate of Status Desired: No**

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

UNITED AGENT GROUP INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US

*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

**Officer/Director Detail :**

Title SVP  
Name MILLER, KATHY D  
Address ONE INDEPENDENT DR, SUITE 114  
City-State-Zip: JACKSONVILLE FL 32202

Title VP  
Name MAS, MICHAEL J  
Address ONE INDEPENDENT DRIVE, SUITE 114  
City-State-Zip: JACKSONVILLE FL 32202

Title SVP  
Name ARGALAS, BARRY  
Address ONE INDEPENDENT DRIVE, SUITE 114  
City-State-Zip: JACKSONVILLE FL 32202

*I hereby 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 all other like empowered.*

**SIGNATURE: KATHY D. MILLER**

**SENIOR VICE  
PRESIDENT, BY JON-  
MICHAEL SANCHEZ,  
ATTORNEY-IN-FACT**

**04/14/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date