

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010659

Entity Name: PORT ST. JOHN OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

126 HOLLY BERRY LANE
SAINT JOHNS, FL 32259

Current Mailing Address:

PO BOX 600196
SAINT JOHNS, FL 32260 US

FEI Number: 65-1236225

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CURTIS & ASSOCIATES
701 MARKET STREET
UNIT 109
ST. AUGUSTINE, FL 32095 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 PRESIDENT
Name KARMASIN, BRAD
Address 126 HOLLY BERRY LANE
City-State-Zip: SAINT JOHNS FL 32259

Title VP
Name ECKENRODE, GEORGE
Address 108 HOLLY BERRY LANE
City-State-Zip: SAINT JOHNS FL 32259

Title SECR
Name BERCKMILLER, HOLLY
Address 121 HOLLY BERRY LANE
City-State-Zip: SAINT JOHNS FL 32259

Title TREA
Name JASPER, WILLIAM
Address 129 HOLLY BERRY LANE
City-State-Zip: SAINT JOHNS FL 32259

Title DIR
Name MICHALAKIS, YVONNE
Address 145 HOLLY BERRY LANE
City-State-Zip: SAINT JOHNS FL 32259

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: WILLIAM A. JASPER

TREASURER

01/28/2017

Electronic Signature of Signing Officer/Director Detail

Date