

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008166

**FILED
Apr 26, 2019
Secretary of State
4051338260CC**

Entity Name: VILLAS OF AUGUSTINE ISLAND NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATION MGMT OF PONTE VEDRA, INC
3201 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

ASSOCIATION MGMT OF PONTE VEDRA, INC
3201 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

FEI Number: 20-3304189

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITE, LYNNETTE
ASSOCIATION MANAGEMENT OF POINT VEDRA, INC
3201 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 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: LYNNETTE WHITE

04/26/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HAMPTON , GLEN
Address 3201 SAWGRASS VILLAGE CIRCLE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title VP
Name BOYLE, DIANE
Address 3201 SAWGRASS VILLAGE CIRCLE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SECRETARY, TREASURER
Name NILSSON, PAULA
Address 3201 SAWGRASS VILLAGE CIRCLE
City-State-Zip: PONTE VEDRA BEACH FL 32082

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: HAMPTON, GLEN

PRESIDENT

04/26/2019

Electronic Signature of Signing Officer/Director Detail

Date