

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12981

**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC3439689993**

**Entity Name:** FAIRFIELD PONTE VEDRA ASSOCIATION, INC.

**Current Principal Place of Business:**

4003 HARTLEY ROAD  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

4003 HARTLEY ROAD  
JACKSONVILLE, FL 32257 US

**FEI Number:** 59-2628195

**Certificate of Status Desired:** No

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

CANTRELL, BRYAN  
4003 HARTLEY ROAD  
JACKSONVILLE, FL 32257 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 D  
Name RON, GRAY  
Address 4003 HARTLEY RD  
City-State-Zip: JACKSONVILLE FL 32257

Title TREASURER  
Name GREENE, PETER  
Address 4003 HARTLEY RD  
City-State-Zip: JACKSONVILLE FL 32257

Title PRESIDENT  
Name SMITH, PHILLIP  
Address 4003 HARTLEY RD  
City-State-Zip: JACKSONVILLE FL 32257

Title D  
Name MITCHELL, JOSEPH  
Address 4003 HARTLEY RD  
City-State-Zip: JACKSONVILLE FL 32257

Title D  
Name BATES, JOHN  
Address 4003 HARTLEY RD  
City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR  
Name TUNSTALL, WILLIAM  
Address 4003 HARTLEY RD  
City-State-Zip: JACKSONVILLE FL 32257

Title SECRETARY  
Name WESTINGTON, BILL  
Address 4003 HARTLEY ROAD  
City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR  
Name BLACK, GEOFF  
Address 4003 HARTLEY ROAD  
City-State-Zip: JACKSONVILLE FL 32257

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*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:** PHILLIP SMITH

**PRESIDENT**

**04/23/2014**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name REMOLDE, LOIS  
Address 4003 HARTLEY ROAD  
City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR  
Name OLIVERO, GRACE  
Address 4003 HARTLEY ROAD  
City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR  
Name YOUNGINGER, KAY  
Address 4003 HARTLEY ROAD  
City-State-Zip: JACKSONVILLE FL 32257