#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12981

Entity Name: FAIRFIELD PONTE VEDRA ASSOCIATION, INC.

FILED
Mar 29, 2018
Secretary of State
CC3466708083

### **Current Principal Place of Business:**

8 FAIRFIELD BLVD

PONTE VEDRA BEACH, FL 32082

# **Current Mailing Address:**

P.O. BOX 1939

PONTE VEDRA BEACH, FL 32004-1939 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	VP	Title	DIRECTOR
Name	STRAMM, GIGI	Name	CHAMBERS , AL
Address	4003 HARTLEY RD	Address	4003 HARTLEY RD
City-State-Zip:	JACKSONVILLE FL 32257	City-State-Zip:	JACKSONVILLE FL 32257

Title DIRECTOR Title D

NameMELFI, PATRICIANameMITCHELL, JOSEPHAddress4003 HARTLEY RDAddress4003 HARTLEY RD

City-State-Zip: JACKSONVILLE FL 32257 City-State-Zip: JACKSONVILLE FL 32257

Title PRESIDENT Title DIRECTOR

Name TUNSTALL, WILLIAM Name WILSON, KATHLEEN
Address 4003 HARTLEY RD Address 4003 HARTLEY ROAD

City-State-Zip: JACKSONVILLE FL 32257 City-State-Zip: JACKSONVILLE FL 32257

Title TREASURER Title DIRECTOR

NameBLACK, GEOFFNameOLIVERO, GRACEAddress4003 HARTLEY ROADAddress4003 HARTLEY ROADCity-State-Zip:JACKSONVILLE FL 32257City-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: WILLIAM TUNSTALL PRESIDENT 03/29/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

City-State-Zip: JACKSONVILLE FL 32257

Title SECRETARY Title DIRECTOR Name MOON, JERRI Name  $\mathsf{MIMS}$  ,  $\mathsf{BILL}$ 

Address 4003 HARTLEY RD. Address 4003 HARTLEY RD.

City-State-Zip: JACKSONVILLE FL 32257 City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR Title DIRECTOR Name WOOD, MATT Name ELLIS, VANESA

Address 4003 HARTLEY RD. 4003 HARTLEY RD. Address City-State-Zip: JACKSONVILLE FL 32257