

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001087

Entity Name: AUSTIN-BAYMEADOWS ASSOCIATION, INC.

FILED
Mar 07, 2024
Secretary of State
4915849665CC

Current Principal Place of Business:

10365 HOOD RD SOUTH
UNIT 205 MASTER
JACKSONVILLE, FL 32257

Current Mailing Address:

PO BOX 54870
JACKSONVILLE, FL 32246

FEI Number: 59-3591083

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FPM COMMUNITIES, LLC.
10365 HOOD RD SOUTH #205
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: MICHAEL HODGES

03/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name ELISHA VOGELSANG , ELISHA
Address 10365 HOOD RD SOUTH
 UNIT 205 MASTER
City-State-Zip: JACKSONVILLE FL 32257

Title TREASURER
Name TREECE, THOMAS
Address 10365 HOOD RD SOUTH
 MASTER UNIT 205
City-State-Zip: JACKSONVILLE FL 32257

Title SECRETARY
Name GARRISON, JOSH
Address 10365 HOOD RD SOUTH
 UNIT 205
City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR
Name DOAUD, FARIS
Address 10365 HOOD RD S
 STE 205
City-State-Zip: JACKSONVILLE FL 32257

Title DIRECTOR
Name YATES, PHILIP
Address 10365 HOOD RD S
 STE 205
City-State-Zip: JACKSONVILLE FL 32257

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: ELISHA VOGELSANG

PRESIDENT

03/07/2024

Electronic Signature of Signing Officer/Director Detail

Date