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.	

PRES

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SIGNA	TURE:	PHIL	YATE	S		

I

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: AUSTIN-BAYMEADOWS ASSOCIATION, INC.

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	JRE: MICHAEL HODGES								
	Electronic Signature of Registered Agent			Date					
Officer/Director Detail :									
Title	PRES	Title	VP						
Name	YATES, PHIL	Name	TREECE, THOMAS						
Address	4465 BAYMEADOWS RD, STE 8	Address	4465 BAYMEADOWS RD						
City-State-Zip:	JACKSONVILLE FL 32257	City-State-Zip:	SUITE 2 JACKSONVILLE FL 32257						
Title	SECRETARY								
Name	VOGELSANG , ELISHA								
Address	4465 BAYMEADOWS ROAD SUITE 1								
City-State-Zip:	JACKSONVILLE FL 32257								

Current Principal Place of Business: 4465 BAYMEADOWS ROAD SUITE 8 JACKSONVILLE, FL 32257

Current Mailing Address:

DOCUMENT# N98000001087

PO BOX 54870 JACKSONVILLE, FL 32246

FEI Number: 59-3591083

Name and Address of Current Registered Agent:

FPM COMMUNITIES, LLC. 10365 HOOD RD SOUTH #205 JACKSONVILLE, FL 32257 US Certificate of Status Desired: No

Date

03/05/2022