

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 746522

FILED  
Apr 30, 2003  
Secretary of State

**Entity Name:** CHARTER POINT COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

4499 CHARTER POINT BLVD  
JACKSONVILLE, FL 322771027 US

**New Principal Place of Business:**

**Current Mailing Address:**

4499 CHARTER POINT BLVD  
JACKSONVILLE, FL 322771027 US

**New Mailing Address:**

**FEI Number:** 51-0189672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUEY, BOBBY R  
4499 CHARTER POINT BLVD  
JACKSONVILLE, FL 322771027 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KAHAK, GAYLE  
Address: 4346 BAY FOREST TERR  
City-St-Zip: JACKSONVILLE, FL 32277

Title: TD ( ) Delete  
Name: HUEY, BOBBY,  
Address: 4499 CHARTER POINT BLVD  
City-St-Zip: JACKSONVILLE, FL 322771027 US

Title: VPD ( ) Delete  
Name: TIBBETTS, DOUGLAS  
Address: 4410 FERN CREEK DR  
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD ( ) Delete  
Name: PETERSON, GENNELL  
Address: 4367 FERN CREEK DR  
City-St-Zip: JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: TIBBETTS, DOUGLAS  
Address: 4410 FERN CREEK DR.  
City-St-Zip: JACKSONVILLE, FL 32277

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: BOYD, JEFFERY  
Address: 4463 CHARTER POINT BLVD  
City-St-Zip: JACKSONVILLE, FL 32277

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BOBBY R. HUEY

TD

04/30/2003

Electronic Signature of Signing Officer or Director

Date