

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757762

FILED  
Feb 05, 2010  
Secretary of State

**Entity Name:** PONCE LANDING OF ST. AUGUSTINE BEACH HOMEOWNERS ASSOC., INC.

**Current Principal Place of Business:**

826 A1A BEACH BLVD.  
#41  
ST AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

**Current Mailing Address:**

826 A1A BEACH BLVD.  
#41  
ST AUGUSTINE, FL 32080 US

**New Mailing Address:**

**FEI Number:** 59-2231331

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, KATHERINE G.  
780 NORTH PONCE DE LEON BLVD  
ST. AUGUSTINE, FL 32084 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: TD  
Name: THORNE, SUSAN  
Address: 5339 RIVERVIEW DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: SD  
Name: BOECHLER, GERALD  
Address: 826 A1A BEACH BLVD #43  
City-St-Zip: SAINT AUGUSTINE BEACH, FL 32080

Title: VPD  
Name: SAMPLE, FRANK  
Address: 321 CHATTOLANEE HILL ROAD  
City-St-Zip: OWINGS MILLS, MD 21117

Title: PD  
Name: TIERNEY, TIM  
Address: 969 RIVERWATCH DRIVE  
City-St-Zip: VILLA HILLS, KY 41017

Title: D  
Name: HOGAN, ROBERT  
Address: 826 A1A BEACH BLVD #48  
City-St-Zip: ST AUGUSTINE, FL 32080

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: TIM TIERNEY

PD

02/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date