

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757762

FILED
Feb 20, 2012
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: PD
Name: SAMPLE, FRANK
Address: 321 CHATTOLANEE HILL ROAD
City-St-Zip: OWINGS MILLS, MD 21117

Title: VPD
Name: STEINHAUSER, BERNARD
Address: 826 A1A BEACH BLVD 36
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D
Name: RILEY, MITCH
Address: 1439 MEDOC LANE
City-St-Zip: FT MYERS, FL 33919

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: GERALD BOECHLER

SD

02/20/2012

Electronic Signature of Signing Officer or Director

Date