

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2002 8:00 am
Secretary of State

01-18-2002 90010 018 ****61.25

DOCUMENT # 758689

1. Entity Name

THE POINT PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1177 PARK AVE
 SUITE 5 #196
 ORANGE PARK FL 32073

1177 PARK AVE
 SUITE 5 #196
 ORANGE PARK FL 32073

2. Principal Place of Business

3. Mailing Address

1839 Harbor Is. DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ORANGE PARK, FL

Zip

Country

Zip

Country

32003

CLAY

4. FEI Number

59-2282146

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALLEN-HALL, JANE
 1839 HARBOR ISLAND DR
 ORANGE PARK FL 32003

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Jane Allen Hall

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBERTS, BLAIR DR 313 SCENIC POINT LANE ORANGE PARK FL 32003	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD TITSHAW, MARILYN 326 SCENIC POINT LANE ORANGE PARK FL 32003	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WRIGHT, JOHN 312 SCENIC POINT LANE ORANGE PARK FL 32003	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President John Wright 1808 Lakemont Circle Middleburg, FL 32068	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Charles Keeble 311 Scenic Point Lane ORANGE PARK, FL 32003	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec/Treasurer Bret Reddick 330 Scenic Point Lane ORANGE PARK, FL 32003	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-9-02

904-219-9674

CR2E037 (9/01)