2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#761635

FILED Apr 16, 2002 8:00 AM Secretary of State

Entity Name: MARSH LANDING AT SAWGRASS HOMEOWNERS ASSOCIATIONI, INC.

	rincipal Place of Business:	New Principal Place	e of Business:	
	SH LANDING BLVD.			
STE. 3 Ponte ve	ERDRA BEACH, FL 32082 US			
Current M	lailing Address:	New Mailing Addres	ss:	
4400 MAR	SH LANDING BLVD.			
STE. 3 PONTE VE	ERDRA BEACH, FL 32082 US			
	: 59-2936248 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
	,		.,	
	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
4400 MAR:	TT, JANET C SH LANDING BLVD. EDRA BEACH, FL 32082			
	named entity submits this statement for the period of Florida.	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR				
	Electronic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete GARANT, D L 24280 MARSH LANDING PARKWAY PONTE VEDRA BEACH, FL 32082	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Delete GHILONI, PETER J 24434 MOSS CREEK LN PONTE VEDRA BEACH, FL 32082	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () Delete RODERIQUE, DONALD 24501 INDIAN MIDDEN WAY PONTE VEDRA BEACH, FL 32082	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BLOCKER, MICHAEL H 24651 MISTY LAKE DR. PONTE VEDRA BEACH, FL 32082	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TD () Delete HERRON, PAUL 105 CYPRESS LAGOON CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: City-St-Zip:	PONTE VEDRA BEACH, FL 32082			

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: PETER J. GHILONI PD 04/16/2002