2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003
Secretary of State

DOCUMENT# 761635

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

Current Principal Place of Business:

4400 MARSH LANDING BLVD.
STE. 3
PONTE VERDRA BEACH, FL 32082 US

New Principal Place of Business:

4200 MARSH LANDING BLVD.
STE. 200
JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address:

4400 MARSH LANDING BLVD.
STE. 3
PONTE VERDRA BEACH, FL 32082 US

New Mailing Address:

4200 MARSH LANDING BLVD.
STE. 200
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-2936248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRITCHETT, JANET C
4400 MARSH LANDING BLVD.
PONTE VEDRA BEACH, FL 32082

Name and Address of New Registered Agent:

PRITCHETT, JANET C
4200 MARSH LANDING BLVD.
SUITE 200
JACKSONVILLE BEACH, FL 32250

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: _____ 03/24/2003
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GARANT, D L
Address: 24280 MARSH LANDING PARKWAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD ( ) Delete
Name: GHILONI, PETER J
Address: 24434 MOSS CREEK LN
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SD ( ) Delete
Name: RODERIQUE, DONALD
Address: 24501 INDIAN MIDDEN WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: BLOCKER, MICHAEL H
Address: 24651 MISTY LAKE DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: TD ( ) Delete
Name: HERRON, PAUL
Address: 105 CYPRESS LAGOON CT.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: MERCADO, LINDA
Address: 24308 MOSS CREEK LN.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: PETER GHILONI P 03/24/2003
Electronic Signature of Signing Officer or Director — Date