## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # G52144

(4)

PONTE VEDRA CLUB REALTY, INC.

**FILED** 

Jul 09 1997 8:00am

Secretary of State

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Principal Place of Business Mailing Address			. 1901/11 0001 01/10 11001 11011 010/1 010/1	Binci diffit genit Athit Graft Atfit 1884	
280 PONTE VEDRA BLVD PONTE VEDRA BEACH FL 32082		280 PONTE VEDRA BLVD PONTE VEDRA BEACH FL 32	2082-1810		
				3. Date Incorporated or Qualified 08/01/1983	3a. Date of Last Report 04/25/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		<u>59</u> -2307432	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
I City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25	29 30	0		Yes No
	9. Name and Address of Curren	nt Hegistered Agent	81 Name	10. Name and Address of New Rec	Jistered Agent
	TER, DAVID M.		of Name		
	1 RIVERPLACE BLVD.		82 Street Add	ress (P.O. Box Number is Not Acceptabl	e)
SUITE 1500			-		
JACKSONVILLE FL 32207			83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes.	the above-named corp	poration submits this statement for the pe	prose of changing its registered
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the oblig	) of Florida. Such change was aut lations of, Section 607,0505, Floric	horized by the corpora da Statutes.	ilion's board of directors, I hereby accep	t the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	APOTE F	tegistered Agent signature regul	to During the Land	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	P	DELETE	1.1 TITLE	ADDITIONS, OF IANGES TO OFFICE	Change Addition
NAME	HARRISON, MURLE		1.2 NAME		
STREET ADDRESS 9540 SAN JOSE BLVD.			1.3 STREET ADDRESS		
CITY-ST-ZIP	JAX, FL 32257		1.4 CITY - ST - ZIP		
TITLE	VST	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LUEDERS, JACK C. JR.		2.2 NAME		
STREET ADDRESS	9540 SAN JOSE BLVD		2.3 STREET ADDRESS		;
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-ST-ZIP		:
TITLE	DV	DELETE	3.1 TITLE	·	☐ Change ☐ Addition
NAME	LUKE, JOSEPH C		3.2 NAME		
STREET ADDRESS	9540 SAN JOSE BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 00000		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition
NAME	FOSTER, DAVID M.		4. 2 NAME		
STREET ADDRESS	1300 GULF LIFE DR		4.3 STREET ADORESS		į
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP		
TITLE	WAONOO ITTICLE 1 E	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		End of any and any and any
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
l i		- Ottelt			, change Li Addition
NAME CTOSET ADDOSES			62 NAME		
STREET ADDRESS	te *		63 STREET ADDRESS		İ
CITY-ST-ZIP	au coeffe that the information a vention	al with this filing does not suglify.	6.4 CiTY - ST - ZiP	d in Coation 110 07/2V/i). Elecide Statuted	I death as possible that the

I do nereby 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GOU-255-6927