

**2007-FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # J96931**

1. Entity Name  
VILLAGE JEWELER OF PONTE VEDRA, INC.



Principal Place of Business  
880 SAWGRASS VILLAGE  
PONTE VEDRA, FL 32082

Mailing Address  
880 SAWGRASS VILLAGE  
PONTE VEDRA, FL 32082



01122007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2847343

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

JAMELE, NICHOLAS  
1213 SALT CREEK POINTE WAY  
PONTE VEDRA BEACH, FL 32082

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME JAMELE, NICHOLAS  
STREET ADDRESS 1213 SALT CREEK POINTE WAY  
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE PD  
NAME FELDER, RICHARD  
STREET ADDRESS 136 SHELBY'S COVE CT  
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000595605  
01/23/07-80047-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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:** \_\_\_\_\_

*Richard Felder*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**RICHARD FELDER**

**01-18-07**

Date

Daytime Phone #