

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2003 8:00 am
Secretary of State

01-21-2003 90062 036 ****61.25

DOCUMENT # N00000003790

1. Entity Name

THE NORTHEAST QUADRANT PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

**ROGERS TOWERS BAILEY ET AL
1301 RIVERPLACE BLVD #1500
JACKSONVILLE FL 32207**

Mailing Address

**ROGERS TOWERS BAILEY ET AL
1301 RIVERPLACE BLVD #1500
JACKSONVILLE FL 32207**

2. Principal Place of Business

3625 Hendricks Avenue

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, Florida

City & State

Zip

32207

Country

Country

4. FEI Number **APPLIED FOR**
05-0558161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CRANFORD, CHARLES L ESQ
1301 RIVERPLACE BLVD #1500
JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name **J. Malcolm Jones, Jr.**

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

3625 Hendricks Avenue

City

Jacksonville

FL

Zip Code
32207

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

8-1-03

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VPSD** ☐ Delete
NAME **SKINNER, A C III**
STREET ADDRESS **2963 DUPONT AVE STE 2**
CITY-ST-ZIP **JACKSONVILLE FL 32217**

TITLE **VPD** ☐ Delete
NAME **SKINNER, C. BRIGHTMAN JR**
STREET ADDRESS **78 SAN JUAN DRIVE**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **VPD** ☐ Delete
NAME **JONES, DAVID**
STREET ADDRESS **46000 MANEKIN PLAZA**
CITY-ST-ZIP **STERLING VA 20166**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPS** ☐ Change ☒ Addition
NAME **J. Malcolm Jones, Jr.**
STREET ADDRESS **3625 Hendricks Avenue**
CITY-ST-ZIP **Jacksonville, FL 32207**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption state indicated on this report or supplemental report is true and accurate and that my signature shall have 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 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: **SIGNATURE REQUIRED**

8-1-03

904-398-4715

CR2E037 (4/03)