

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90497 030 ****61.25

DOCUMENT # N00000006098 ✓
 1. Entity Name
 SOUTHCHASE OWNERS ASSOCIATION, INC.

Principal Place of Business: 2215 E SR 200, YULEE FL 32097
 Mailing Address: P O BOX 1987, YULEE FL 32041-1987

2. Principal Place of Business / Suite, Apt. #, etc. / City & State / Zip / Country
 3. Mailing Address / Suite, Apt. #, etc. / City & State / Zip / Country

4. FEI Number: 59-3670163
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

U T I O R I

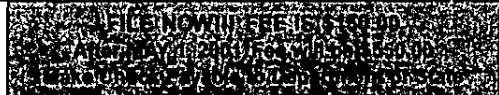
DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 MATOVINA, GREGORY E
 2955 HARTLEY ROAD, SUITE 108
 JACKSONVILLE FL 32257

7. Name and Address of New Registered Agent
 Name: TERRELL POWELL
 Street Address (P.O. Box Number is Not Acceptable): 2215 E SR 200
 City: YULEE FL 32097 FL Zip Code

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.
 SIGNATURE: *Terrell Powell* DATE: 3-23-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)



10. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	MATOVINA, GREGORY E	
STREET ADDRESS	2955 HARTLEY ROAD, SUITE 108	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	DVPT	<input type="checkbox"/> Delete
NAME	BORSTEIN, DONALD K	
STREET ADDRESS	2955 HARTLEY ROAD, SUITE 108	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	DS	<input type="checkbox"/> Delete
NAME	MATOVINA, LESLIE H	
STREET ADDRESS	2955 HARTLEY ROAD, SUITE 108	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gregory E Matovina* DATE: 3/25/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)