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Apr 23 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01546 (3)
1. Corporation Name
VILLAGES OF SAN JOSE OWNERS ASSOCIATION, INC.



Principal Place of Business
C/O FOUR SEASONS MGMT
10036 SANGRASS DR #3
PONTE VEDRA BCH FL 32082
US

Mailing Address
C/O FOUR SEASONS MGMT
PO BOX 1159
PONTE VEDRA BCH FL 32004
US

3. Date Incorporated or Qualified
02/20/1984

4. FEI Number
59-2473109

Applied For
Not Applicable

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
28 Suite, Apt. #, etc.
27 City & State
29 Zip
30 Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MUNCH, DONALD J
C/O FOUR SEASONS MGMT
10036 SAWGRASS DR #3
PONTE VEDRA BCH FL 32082

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	PULDY, STEPHEN	3809 LA VISTA CIR, #214	JACKSONVILLE FL	<input type="checkbox"/>
VD	WEINTRAUB, STEVE	8466 PAPELON WAY	JACKSONVILLE FL	<input type="checkbox"/>
S	BRUST, ESTELLE	4069 MIZNER CIRCLE S.	JACKSONVILLE FL	<input checked="" type="checkbox"/>
TD	MONTGOMERY, YANCY	836 BARQUERO COURT N	JACKSONVILLE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	CHANGE	ADDITION
1.1	Leonard Garza	3820 LA VISTA CIR #116	Jax, FL. 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1	Marymar	4020 LA VISTA CIR #112	Jax, FL. 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1	JACK COYLE	4175 Paloma Point Court	Jax, FL. 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1				<input type="checkbox"/>	<input type="checkbox"/>
5.1				<input type="checkbox"/>	<input type="checkbox"/>
6.1				<input type="checkbox"/>	<input type="checkbox"/>

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stephen Pully

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