

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

DOCUMENT # N02000004151

1. Entity Name

Chimney Lakes Office Center Owners'
Association, Inc.



FILED

03 OCT -8 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
600023642836
10/08/03--01031--003 **\$1.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
101 Plantation Drive

3. Mailing Address
P O Box 3153

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Ponte Vedra Beach, FL

City & State
Ponte Vedra Beach, FL

4. FEI Number 75-3067091

Applied For
Not Applicable

Zip
32082

Country
US

Zip
32004

Country
US

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Pike Hall, III

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

138 Muirfield Drive

City Ponte Vedra Beach

FL

Zip Code
32082

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

Pike Hall, III

10/06/03

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FEE IS \$61.25
Initial or Amended UBR**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P / D Pike Hall, III
138 Muirfield Drive
Ponte Vedra Beach, FL 32082

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP / D W. B. Towers, Jr.
6215 Wilson Blvd
Jacksonville, Florida 32210

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S / T / D John B. Towers
6215 Wilson Blvd.
Jacksonville, Florida 32210

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pike Hall, III

10/06/03

904-280-9901

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

CR2E037B (12/02)

Chimney Lakes Office Center Owners' Association, Inc.

P O Box 3153

Ponte Vedra Beach, Florida 32004

904-280-9901

10/06/2003

Uniform Business Report
Division of Corporations
P O Box 1500
Tallahassee, Florida 32302-1500

Document # N02000004151

Gentlemen:

Your database shows that the Uniform Business Report for the Chimney Lakes Office Center Owners' Association, Inc. was sent to the wrong address and returned to you. You have already corrected the spelling from "CHIMMEY" to "Chimney."

A Check is attached to cover the 2003 Uniform Business Report.

Thanks for your assistance.

Sincerely,



Pike Hall, III