

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000004493

FILED  
Apr 01, 2003  
Secretary of State

**Entity Name:** LAS PALMAS AT JACKSONVILLE BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1300 GREENRIDGE ROAD  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1300 GREENRIDGE ROAD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 56-2281822

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODRIGUEZ, JOANNA C  
1300 GREENRIDGE ROAD  
JACKSONVILLE, FL 32207

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RODRIGUEZ, JOANNA C  
Address: 1300 GREENRIDGE ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: RODRIGUEZ, ALBERT F  
Address: 1300 GREENRIDGE ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: CENCI, CHRIS  
Address: 214 SIXTH AVENUE SOUTH APT. #2  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOANNA C. RODRIGUEZ

D

04/01/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date