

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004979

FILED  
Feb 09, 2009  
Secretary of State

**Entity Name:** PONTE VEDRA BEACH PARK AT LIBRARY BOULEVARD, INC.

**Current Principal Place of Business:**

226-5 SOLANA RD  
STE124  
PONTE VEDRA BEACH, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

226-5 SOLANA RD  
STE124  
PONTE VEDRA BEACH, FL 32082 US

**New Mailing Address:**

**FEI Number:** 57-1170935

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DRAKE, JANET L  
6 FAIRFIELD BLVD, STE 7  
PONTE VEDRA BEACH, FL 32082 US

**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: C ( ) Delete  
Name: SIMPSON, VIRGINIA  
Address: 37 RAMONA STREET  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VC ( ) Delete  
Name: WATSON, MARY  
Address: 352 PONTE VEDRA BLVD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T ( ) Delete  
Name: SCHMACHTENBERGER, LESLI  
Address: 21 SOLANA ROAD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete  
Name: BAKER, MARTHA  
Address: 503 PONTE VERDA BLVD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LESLI A. SCHMACHTENBERGER

MRS.

02/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date