

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008330

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** AVENUE FOUR SOUTH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ASSOCIATION MANAGEMENT OF PONTE VEDRA  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

ASSOCIATION MANAGEMENT OF PONTE VEDRA  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 03-0536834

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSOCIATION MANAGEMENT OF PONTE VEDRA  
3108 SAWGRASS VILLAGE CIRCLE  
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: S ( ) Delete  
Name: LOUIE, TAYSAI G  
Address: 405 S. 1ST ST #211  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP ( ) Delete  
Name: DIAMANT, ROBERT  
Address: 550 LEMASTER DR.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD ( ) Delete  
Name: DIAMONT, MICHAEL  
Address: 1415 1ST ST. #705  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

Title: DST (X) Change ( ) Addition  
Name: LOUIE, SAIG  
Address: 405 S. 1ST ST #211  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DVP (X) Change ( ) Addition  
Name: DIAMANT, ROBERT  
Address: 550 LEMASTER DR.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DP (X) Change ( ) Addition  
Name: DIAMONT, MICHAEL  
Address: 1415 1ST ST. #705  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: MICHAEL DIAMONT

DP

04/16/2009

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

\_\_\_\_\_  
Date