


2004 NOT-FOR-PROFI. CORPORATION ANNUAL REPORT

FILED
May 19, 2004 8:00 am
Secretary of State

04-12-2004 90299 045 ****61.25

DOCUMENT # N03000010664

1. Entity Name
 PARK PLACE AT THE AVENUES OWNERS ASSOCIATION, INC.



Principal Place of Business
 4209 BAYMEADOWS RD.
 JACKSONVILLE, FL 32217

Mailing Address
 4209 BAYMEADOWS RD.
 JACKSONVILLE, FL 32217

66422731



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04082004 Chg-NP CR2E037 (10/03)

City & State
 City & State

Zip Country Zip Country

4. FEI Number
14-1908046

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

BOATRIGHT, SCOTT R ESQ.
 4209 BAYMEADOWS RD.
 JACKSONVILLE, FL 32217

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

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is **\$61.25** Due by **May 1, 2004**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHEFFIELD, J. HOWARD 4209 BAYMEADOWS RD. JACKSONVILLE, FL 32217 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOATRIGHT, SCOTT R 4209 BAYMEADOWS RD. JACKSONVILLE, FL 32217 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SPINNER, WILLIAM T 5605 FLORIDA MINING BLVD. S., STE. 11 JACKSONVILLE, FL 32257 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____ Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment 66422731
N03000010664
SHEFFIELD & BOATRIGHT
ATTORNEYS AT LAW

J. HOWARD SHEFFIELD
SCOTT R. BOATRIGHT

4209 BAYMEADOWS ROAD, SUITE 4
JACKSONVILLE, FLORIDA 32217

TELEPHONE: (904) 733-7900
FACSIMILE: (904) 730-4111
(904) 730-2488
(904) 733-5226

E-MAIL: SRoper@s-blaw.com

May 17, 2004

Division of Corporation
~~PO Box 6227~~
Tallahassee, FL 32314

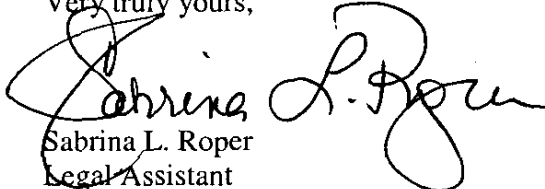
Re: 2003 Annual Report; Park Place at the Avenues Owners Association, Inc.

Dear Sir/Madam:

I have enclosed a copy of the 2003 Annual Report filed with the Secretary of State in April 8, 2004, along with the check #2015 in the amount of \$61.25, which in turn was denied due to there not being a Federal Identification Number. Upon receipt of the Secretary of State's notification of a Federal Identification Number missing, our office proceeded to fax a request for Federal Identification Number to the IRS, a copy attached here reflecting the request to the IRS on April 26, 2004; and our second request for same on May 6, 2004. Due to the delay with the IRS for the Federal Identification Number, our office is late in returning said information to the Secretary of State, and request that our office not be penalized. We have attempted in every way to respond in a timely manner and rush the information to your attention, but the delay was through the IRS's lack of response and cooperation in returning or processing our form SS-4. Today I was able to finally have an employee of the IRS process our request and provide the number, as noted on the attached copy of the 2003 Annual Report.

Thank you for your help with this matter. If you have any questions, please feel free to call.

Very truly yours,


Sabrina L. Roper
Legal Assistant

/s/r
Enclosure

PARK PLACE AVENUES, LLC
4209 BAYMEADOWS RD., SUITE 4
JACKSONVILLE, FL 32217
(904) 733-7900



Attachment CNB NATIONAL I
JACKSONVILLE, FL 32246
63-1228/631
66422731
#-1030000100604

0215

4/8/2004

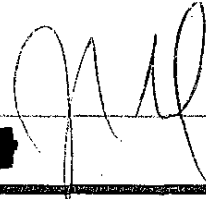
PAY TO THE ORDER OF Florida Department Of State

\$ **61.25

Sixty-One and 25/100***** DOLLARS  

MEMO 2004 Annual Report corporation

[REDACTED]



PARK PLACE AVENUES, LLC
Florida Department Of State
OFFICE

4/8/2004

0215

61.25

Park Place Ave 2004 Annual Report corporation

61.25

PARK PLACE AVENUES, LLC
Florida Department Of State
OFFICE

4/8/2004

0215

61.25

Park Place Ave 2004 Annual Report corporation

61.25

Attachment 66422731
103000010664

4209 BAYMEADOWS ROAD, SUITE 4
JACKSONVILLE, FLORIDA 32217
Phone: 733-7900
Fax: 733-5226

**PARK PLACE AT THE
AVENUES OWNERS
ASSOCIATION, INC. - a Not-
for-Profit corporation**

Fax

To: INTERNAL REVENUE SERVICE - SS4 **From:** J. HOWARD SHEFFIELD
FILING

Fax: 631-447-8960 **Date:** May 6, 2004

Phone: **Pages:** 2

Re: APPLICATION FOR FEDERAL ID NO. **CC:**

Urgent **For Review** **Please Comment** **Please Reply** **Please Recycle**

•Comments: PLEASE FIND ATTACHED THE COMPLETED AND EXECUTED SS-4 FORM FOR PARK PLACE AT THE AVENUES OWNERS ASSOCIATION, INC., a Florida Not-for-Profit Corporation. IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CALL ME OR MR. SHEFFIELD. I AM THE THIRD PARTY DESIGNEE ON THE FORM. THANK YOU.

Attachment 66422731
#103000010664

4209 BAYMEADOWS ROAD, SUITE 4
JACKSONVILLE, FLORIDA 32217
Phone: 733-7300
Fax: 733-6226

**PARK PLACE AT THE
AVENUES OWNERS
ASSOCIATION, INC. - a Not-
for-Profit corporation**

Fax

To: INTERNAL REVENUE SERVICE - SS4 From: J. HOWARD SHEFFIELD
FILING
Fax: 631-447-8960 Date: May 6, 2004
Pages: 2
Re: APPLICATION FOR FEDERAL ID NO. CC:

Urgent For Review Please Comment Please Reply Please Recycle

Comments: PLEASE FIND ATTACHED THE COMPLETED AND EXECUTED SS-4 FORM FOR PARK PLACE AT THE AVENUES OWNERS ASSOCIATION, INC., a Florida Not-for-Profit Corporation. IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CALL ME OR MR. SHEFFIELD. I AM THE THIRD PARTY DESIGNEE ON THE FORM. THANK YOU.

Reason for error
E.1) Hang up or line fail
E.3) No answer
E.2) Busy
E.4) No facsimile connection

Date/Time: May, 6, 2004 11:31AM
File No. Mode Destination Pg(s) Result Page
6066 Memory TX 16314478960 P. 2 OK
Transmission Result Report (MemoryTX) (May, 6, 2004 11:32AM) * * *
1) Sheffield & Boatright
2) Sheffield & Boatright
P. 1

Attachment 66422737
#103000010664

4209 BAYMEADOWS ROAD, SUITE 4
JACKSONVILLE, FLORIDA 32217
Phone: 733-7900
Fax: 733-5226

**PARK PLACE AT THE
AVENUES OWNERS
ASSOCIATION, INC. - a Not-
for-Profit corporation**

Fax

To: INTERNAL REVENUE SERVICE - SS4 **From:** SABRINA ROPER
FILING

Fax: 631-447-8960 **Date:** April 26, 2004

Phone: **Pages:** 2

Re: APPLICATION FOR FEDERAL ID NO. **CC:**

Urgent **For Review** **Please Comment** **Please Reply** **Please Recycle**

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Attachment 66422731
#163000010664

* * * Transmission Result Report (MemoryTX) (Apr.26. 2004 .5:44PM) * * *

1)
2)

P. 1

Date/Time: Apr.26. 2004 5:42PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
459	Memory TX	16314478960	P. 2	OK	

Reason for error

- E.1) Hang up or line fail
- E.3) No answer

- E.2) Busy
- E.4) No facsimile connection

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X Urgent For Review Please Comment Please Reply Please Recycle

To: INTERNAL REVENUE SERVICE - SS-4 From: SABRINA ROOPER
FILING
Fax: 631-417-6960 Date: Apr 26, 2004
Pages: 2
E-mail: APPLICATION FOR FEDERAL ID NO. etc.

Fax

PARK PLACE AT THE AVENUES OWNERS ASSOCIATION, INC. - a Not-for-Profit corporation

4000 BAYHIDEWAYS ROAD, SUITE A JACKSONVILLE, FLORIDA 32217
Phone: 732-7200
Fax: 732-5228