

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90042 035 ****61.25

DOCUMENT # N05733

1. Entity Name

THE SOUTHPONTE ASSOCIATION, INC.

Principal Place of Business

5303 ORTEGA BLVD.
 UNIT 104
 JACKSONVILLE FL 32210
 US

Mailing Address

5303 ORTEGA BLVD.
 UNIT 104
 JACKSONVILLE FL 32210
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2458071

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STALLINGS, GEORGE B JR
5303 ORTEGA BLVD.
UNIT 104
JACKSONVILLE FL 32210

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.

SIGNATURE

George B. Stallings, Jr.

February 12, 2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BONEY, PAISLEY	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 208	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	TD	<input type="checkbox"/> Delete
NAME	STALLINGS, GEORGE B JR.	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 104	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BRINKLEY, ROGER	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 203	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	CULPEPPER, SUE	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 206	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	D	<input type="checkbox"/> Delete
NAME	STALLINGS, MARTHA	
STREET ADDRESS	5303 ORTEGA BLVD UNIT 101	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	D	<input type="checkbox"/> Delete
NAME	DITTMAR, C. HARRIS	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 104	
CITY-ST-ZIP	JACKSONVILLE FL 32210	

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	IRA, STEWART	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 204	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BONEY, PAISLEY	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 208	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CULPEPPER, SUE	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 206	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TAYLOR, LOUISE	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 305	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUCOTE, CAROL	
STREET ADDRESS	5303 ORTEGA BLVD. UNIT 102	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George B. Stallings, Jr.

February 12, 2001

(904) 384-5254

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)



DO NOT WRITE IN THIS SPACE