

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90056 025 *****61.25

DOCUMENT # NO5756

1. Entity Name

SOLANO WOODS HOMEOWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

P.O. BOX 143

Suite, Apt #, etc

3. Mailing Address

P.O. BOX 143

Suite, Apt. #, etc,

City & State

PONTE VEDRA BEACH, FL

City & State

PONTE VEDRA BEACH, FL

4. FEI Number

59-2713393

Applied For

☐ Not Applicable

Zip

32004-0143

Country

Zip

32004-0143

Country

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
WALBURN, JAMES K.

Street Address (P.O. Box Number is Not Acceptable)

106 DUCK BILL COVE

City

PONTE VEDRA BEACH

FL

Zip Code

32082

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

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

DATE

FEE IS \$61.25

Initial or Amended UBR

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

TITLE	P
NAME	EVANS, MIKE
STREET ADDRESS	517 PHEASANT RUN
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082

TITLE	VP
NAME	BARROW, AMY
STREET ADDRESS	103 MALLARD TRAIL
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082

TITLE	S
NAME	HUSTON, FRANCES
STREET ADDRESS	104 DUCK BILL COVE
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082

TITLE	T
NAME	WALBURN, JAMES K.
STREET ADDRESS	106 DUCK BILL COVE
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082

TITLE	D
NAME	HERNANDEZ, MIMI
STREET ADDRESS	103 TURTLE WALK
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082

TITLE	
NAME	
STREET ADDRESS	
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11.

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: James K. Walburn **JAMES K. WALBURN**

2/8/2006

904 285-7176

Date

Daytime Phone #