

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 26, 2001 08:00 AM
Secretary of State

DOCUMENT # N06541

1. Entity Name
 THE PAVILION CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business % KENNETH C. PERRY 800 PRUDENTIAL DRIVE JACKSONVILLE 32207 US	FL	Mailing Address % KENNETH C. PERRY 800 PRUDENTIAL DRIVE JACKSONVILLE 32207 US	FL
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2. Principal Place of Business C/O HARVEY GRANGER	3. Mailing Address C/O HARVEY GRANGER
Suite, Apt. #, etc. 1325 SAN MARCO BLVD., SUITE 902	Suite, Apt. #, etc. 1325 SAN MARCO BLVD., SUITE 902

City & State JACKSONVILLE FL	City & State JACKSONVILLE FL
Zip 32207	Country US

4. FEI Number 59-2768133	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SMITH & HULSEY
 1800 FLORIDA NATIONAL BANK TOWER
 225 WATER ST.
 JACKSONVILLE FL
 32202 US

7. Name and Address of New Registered Agent

Name
 GRANGER HARVEY

Street Address (P.O. Box Number is Not Acceptable)
 1325 SAN MARCO BLVD.
 SUITE 902

City
 JACKSONVILLE FL Zip Code
 32207

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 HARVEY GRANGER DATE 04/26/2001
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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GRANGER HARVEY 1300 RIVERPLACE TOWER # 1700 JACKSONVILLE FL 32207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PERRY, KENNETH C. 1325 SAN MARCO BOULEVARD, SUITE 901 JACKSONVILLE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MASON, WILLIAM C. 800 PRUDENTIAL DRIVE JACKSONVILLE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST GRANGER HARVEY 1325 SAN MARCO BLVD., SUITE 902 JACKSONVILLE FL 32207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PARRETT DONALD O 1325 SAN MARCO BOULEVARD, SUITE 902 JACKSONVILLE FL 32207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GREENE A. HUGH 1325 SAN MARCO BLVD., SUITE 902 JACKSONVILLE FL 32207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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: HARVEY GRANGER DST 04/26/2001

CR2E037 (11/00)