2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91456 046 ****70.00

DOCUMENT # N12007

1. Entity Name
THE COURTYARDS AT MAYPORT I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1732 KINGSLEY AVE. #202 ORANGE PARK FL 32073 US	1732 KINGSLEY AVE. #202 ORANGE PARK FL 32073 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2907669 ☐ 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
PERRY, ALAN 1732 KINGSLEY AVE. STE. 202 ORANGE PARK FL 32073	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 _____
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 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 TEMPLE, KEITH 2205 SPANISH MOSS DRIVE JACKSONVILLE FL 32246	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Teresa Music 1704 Challenger Ct. W. Atlantic Beach, 32233	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAWYER, RICK 803 COURAGEOUS CT ATLANTIC BEACH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ronald Murphy PO Box 50399 Jacksonville Beach, FL 32240	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LOPANIK, DAVID 1800 MAYPORT ROAD ATLANTIC BEACH FL 32233	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OSBORNE, STEVE 1104 DEFENDER CT ATLANTIC BEACH FL 32233	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BROOBANK, TRACI 2201 CHALLENGER CT E ATLANTIC BEACH FL 32233	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Margaret Jackson 2001 Challenger Ct E. Atlantic Beach FL 32233	☐ Change ☒ Addition

CR2E037 (10/02)

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: [illegible] 42303