

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18304

FILED
Apr 17, 2009
Secretary of State

Entity Name: PARK PLACE AT SAWGRASS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATION MGMT. OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

2000 SAWGRASS VILLAGE DRIVE
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

ASSOCIATION MGMT. OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

101 VERA CRUZ DRIVE
101
PONTE VEDRA BEACH, FL 32082

FEI Number: 59-2851793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNOLLY, C P
ASSOCIATION MGMT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

PARK PLACE AT SAWGRASS
101 VERA CRUZ DRIVE
101
PONTE VEDRA BEACH, FL 32082 US

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: TERRY MCINTYRE

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: KAROL, ROBERT
Address: 2103 SAWGRASS VILLAGE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD () Delete
Name: WHEAT, FRED
Address: 144 N. ROSCOE BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ATKINSON, RICHARD
Address: 2202 SAWGRASS VILLAGE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT KAROL

STD

04/17/2009

Electronic Signature of Signing Officer or Director

Date