

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20752

FILED
Jan 26, 2009
Secretary of State

Entity Name: POOL VILLAS AT FAIRFIELD PONTE VEDRA, INC.

Current Principal Place of Business:

4003 HARTLEY RD.
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

4003 HARTLEY RD.
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-2965067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTREL, BRYAN
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: PUNT, ROGER
Address: 110 HARBOR ISLAND CT.
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: PD () Delete
Name: MEYER, GEORGE
Address: 103 HARBOR ISLAND CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SD () Delete
Name: AMES, BARBARA
Address: 109 VEDRA LANDING CT.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VPD () Change (X) Addition
Name: CARROLL, WALT
Address: 107 HARBOR ISLANE COURT
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: GEORGE MEYER

PD

01/26/2009

Electronic Signature of Signing Officer or Director

Date