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2001 UNIFORM BUSINESS REPORT (UBR)

Feb 15, 2001 8:00 am **DOCUMENT # N24135 Secretary of State** 02-15-2001 90058 041 ****61.25 SEVEN MILE DRIVE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address % MAY MANAGEMENT SERVICES, INC % MAY MANAGEMENT SERVICES, INC 10036 SAWGRASS DR STE 1 10036 SAWGRASS DR STE 1 PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2865375 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) ARENAS, PATRICIA MAY MANAGEMENT SERVICES, INC. 10036 SAWGRASS DRIVE, SUITE 1 City Zip Code PONTE VEDRA BEACH FL 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. SIGNATURE Stonature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete D SIMPSON, GAIL Addition ☐ Change TITLE TITLE MAYER, DAVID NAME NAME 8123 SEVEN MILE DRIVE STREET ADDRESS 8128 SEVEN MILE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PONTE VERDA BEACH FL 32082 PONTE VEDRA BEACH, FL 320802 **VPD** X Delete ☐ Change Addition TITLE TITLE DAVIS, DON NAME NAME SANTEIRO, ERNIE STREET ADDRESS STREET ADDRESS 8160 SEVEN MILE DR 117 SEVEN IRON COURT CITY-ST-ZIP CITY-ST-ZIP PONTE VERDA BEACH FL PONTE VERSE STARTED STARTED TITLE TITLE Change ■ Addition 🞾 Delete CONNOR, BRUCE NAME NAME STREET ADDRESS 8114 SEVEN MILE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PONTE VERDA BEACH FL TITLE ☐ Delete Change ☐ Addition POTTER, JACK STREET ADDRESS 8185 SEVEN MILE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 TITLE ☐ Delete TITLE ☐ Addition RAMPACEK, BRIAN MAME NAME STREET ADDRESS STREET ADDRESS 8107 SEVEN MILE DR CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-0/

2850052

Davtime Phone #

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