

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 29, 2002 8:00 am
Secretary of State

05-29-2002 90724 020 ****61.25

DOCUMENT # N27918

1. Entity Name

VILLAGE HOMEOWNERS OF JAX, INC.

Principal Place of Business

Mailing Address

MARY E ARUNDALE
10960 BEACH BLVD., #357
JACKSONVILLE FL 32246
US

MARY E ARUNDALE
10960 BEACH BLVD., #357
JACKSONVILLE FL 32246
US

2. Principal Place of Business

CATHI DEKLE
Suite, Apt. #, etc.
10960 BEACH BLVD #389

3. Mailing Address

CATHI DEKLE
Suite, Apt. #, etc.
10960 BEACH BLVD #389

City & State
JACKSONVILLE FL

City & State
JACKSONVILLE FL

Zip
32246

Country
DUVAL

Zip
32246

Country
DUVAL

4. FEI Number

59-2931619

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARUNDALE, MARY E
10960 BEACH BLVD., #357
JACKSONVILLE FL 32246

7. Name and Address of New Registered Agent

Name CATHI DEKLE

Street Address (P.O. Box Number is Not Acceptable)
10960 BEACH BLVD #389

City JACKSONVILLE

FL

Zip Code 32246

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

Cathi Dekle Treasurer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-5-02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SPRINGER, JAMES
STREET ADDRESS 10960 BEACH BLVD #455
CITY-ST-ZIP JACKSONVILLE FL 32246 ☐ Delete

TITLE PD
NAME KERN, RAY
STREET ADDRESS 10960 BEACH BLVD #468
CITY-ST-ZIP JACKSONVILLE, FL 32246 ☒ Change ☐ Addition

TITLE SD
NAME KOFKE, CAROL
STREET ADDRESS 10960 BEACH BLVD., #337
CITY-ST-ZIP JACKSONVILLE FL 32246 ☐ Delete

TITLE SD
NAME DAWN WILLIAMS
STREET ADDRESS 10960 BEACH BLVD #336
CITY-ST-ZIP JACKSONVILLE, FL 32246 ☒ Change ☐ Addition

TITLE VPD
NAME KERN, RAYMOND F
STREET ADDRESS 10960 BEACH BLVD #468
CITY-ST-ZIP JACKSONVILLE FL 32246 ☐ Delete

TITLE VPD
NAME JONES, BO
STREET ADDRESS 10960 BEACH BLVD #275
CITY-ST-ZIP JACKSONVILLE, FL 32246 ☒ Change ☐ Addition

TITLE VPD
NAME HIGGS, NONA M
STREET ADDRESS 10960 BEACH BLVD #281
CITY-ST-ZIP JACKSONVILLE FL 32246 ☐ Delete

TITLE VPD
NAME CASSELL, BILL
STREET ADDRESS 10960 BEACH BLVD #504
CITY-ST-ZIP JACKSONVILLE, FL 32246 ☒ Change ☐ Addition

TITLE TD
NAME ARUNDALE, MARY
STREET ADDRESS 10960 BEACH BLVD. #357
CITY-ST-ZIP JACKSONVILLE FL 32246 ☐ Delete

TITLE TD
NAME DEKLE, CATHI
STREET ADDRESS 10960 BEACH BLVD #389
CITY-ST-ZIP JACKSONVILLE, FL 32246 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Cathi Dekle CATHI DEKLE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-5-02 (904) 298-1852 x221

CR2E037 (9/01)