

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N28711 (2)

1. Corporation Name

PACE ISLAND OWNERS ASSOCIATION, INC.

Principal Place of Business

1733 PACE ISLAND TRACE
ORANGE PARK FL 32073

Mailing Address

1733 PACE ISLAND TRACE
ORANGE PARK FL 32073



3. Date Incorporated or Qualified

10/05/1988

3a. Date of Last Report

02/13/1995

4. FEI Number

59-2927306

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POWELL, TERRELL J.
1890 S. 14TH ST.
STE 105
FERNANDINA BCH FL 32034

81 Name Terrell J. Powell

82 Street Address (P.O. Box Number is Not Acceptable)
2215 E. State Rd 200

83

84 City Yulee

FL

85 Zip Code

32097

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

Terrell J. Powell

(NOTE: Registered Agent signature required when reinstating)

2/23/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VTD ☐ DELETE
NAME MIXON, BEN W.
STREET ADDRESS 1733 PACE ISLAND TRACE
CITY-ST-ZIP ORANGE PARK FL

1.1 TITLE SD ☐ Change ☒ Addition
1.2 NAME HALTER, KATHLEEN A.
1.3 STREET ADDRESS 1733 PACE ISLAND TRACE
1.4 CITY-ST-ZIP ORANGE PARK FL 32073 ☐ Change ☒ Addition

TITLE PD ☐ DELETE
NAME WOOD, SUSAN D.
STREET ADDRESS 1733 PACE ISLAND TRACE
CITY-ST-ZIP ORANGE PARK FL

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME RUGGLES, JAMES
2.3 STREET ADDRESS 1780 HOLLY FLOWER LANE
2.4 CITY-ST-ZIP ORANGE PARK FL 32073 ☐ Change ☐ Addition

TITLE SD ☒ DELETE
NAME MOORE, CHERYL A.
STREET ADDRESS 1733 PACE ISLAND TRACE
CITY-ST-ZIP ORANGE PARK FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME ANDERSON, GERALD W.
STREET ADDRESS 2247 SALT MYRTLE LANE
CITY-ST-ZIP ORANGE PARK FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME DIANE CORR
STREET ADDRESS 1994 SALT MYRTLE LANE
CITY-ST-ZIP ORANGE PARK FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan D. Wood Susan D. Wood 2/6/96 904-264-8784

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)