

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90400 004 ****61.25

DOCUMENT # N34642

1. Entity Name

THE JUNCTION HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

4322 WINDTREE DRIVE SOUTH
JACKSONVILLE FL 32257
US

Mailing Address

4322 WINDTREE DRIVE SOUTH
JACKSONVILLE FL 32257
US

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

SAME

Suite, Apt. #, etc.

SAME

City & State

SAME

City & State

SAME

Zip

SAME

Country

SAME

Zip

SAME

Country

4. FEI Number

59-2977941

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, MERL
4322 WINDTREE DRIVE SOUTH
JACKSONVILLE FL 32257

7. Name and Address of New Registered Agent

Name

NA

Street Address (P.O. Box Number is Not Acceptable)

NA

City

NA

FL

Zip Code

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

NA

NA

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE PD ☐ Delete

NAME ANDERSON, MERL
STREET ADDRESS 4322 WINDTREE DRIVE SOUTH
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE VD ☐ Delete

NAME BROWN, DARRYL
STREET ADDRESS 11267 WINDTREE DRIVE EAST
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE TD ☐ Delete

NAME GRIFFITH, KATHRYN
STREET ADDRESS 4339 PATHWOOD
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE TD ☐ Delete

NAME ANDERSON, HARRIET
STREET ADDRESS 4322 WINDTREE DRIVE SOUTH
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ST ☐ Delete

NAME STANDLIN, ANNA
STREET ADDRESS 11264 SHADY GLEN
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition

NAME SAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☒ Change ☐ Addition

NAME RAYMOND BURMAN
STREET ADDRESS 4339 PATHWOOD
CITY-ST-ZIP JACKSONVILLE, FL 32257

TITLE NAME ☒ Change ☐ Addition

NAME KATHRYN BURMAN
STREET ADDRESS 4339 PATHWOOD
CITY-ST-ZIP JACKSONVILLE, FL 32257

TITLE NAME ☐ Change ☐ Addition

NAME SAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☒ Change ☐ Addition

NAME T. HAZEL McLAUGHLIN
STREET ADDRESS 4323 PATHWOOD, JACKSONVILLE, FL 32257

TITLE NAME ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MERL ANDERSON
22 April 2001 2681716

Date Daytime Phone #

CR2E037 (10/00)