

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90035 007 ****61.25

DOCUMENT # N35744 1. Entity Name THE FALLS AT SAWGRASS VILLAGE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3103 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH FL 32082			Mailing Address 3103 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH FL 32082		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CONNOLLY, C.P. ASSOC. MGMT. OF PONTE VEDRA, INC. 3103 SAWGRASS VILLAGE CIR. PONTE VEDRA BEACH FL 32082			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>C.P. Connolly</i></u> <u><i>C.P. CONNOLLY</i></u> <u><i>4-5-04</i></u> 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 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHEAT, FRED 144 N. ROSCOE BLVD PONTE VEDRA BCH FL 32082 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PONDERO, HELENE 3304 SAWGRASS VILLAGE DR. PONTE VEDRA BEACH FL 32082 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SFB COFFEE, JAMES 3304 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HANA, RICHARD 3207 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH FL 32082 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: <u><i>Fred E. Wheat</i></u>		<u><i>4-5-04</i></u> <u><i>904/285-7299</i></u> Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			