

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N92000000362 (5)**

1. Corporation Name

**MARSH LANDING AT SAWGRASS HOMEOWNERS ASSOCIATION
IV, INC.**

Principal Place of Business 4400 MARSH LANDING BLVD STE 3 PONTE VEDRA BEACH FL 32082 US	Mailing Address 4400 MARSH LANDING BLVD STE 3 PONTE VEDRA BEACH FL 32082 US
---	---

3. Date Incorporated or Qualified

11/19/1992

4. FEI Number

59-3189060

Applied For
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 26 27 28 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLETCHER, JEROME S.
4400 MARSH LANDING BOULEVARD
STE 3
JACKSONVILLE FL 32082**

81 Name **Jerome S. Fletcher**

82 Street Address (P.O. Box Number is Not Acceptable)
1548 The Greens Way, Suite 4

83 **Jacksonville Beach**

84 City **FL** 85 Zip Code **32250**

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 regulations in Section 617.0503, Florida Statutes.

SIGNATURE

Jerome S. Fletcher (Jerome S. Fletcher)

2/3/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DS** ☐ DELETE
NAME **HUTCHINSON, FRANCES**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **DP** ☐ DELETE
NAME **FLETCHER, PAUL**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **DVT** ☐ DELETE
NAME **MELCHING, STEVE**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

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

14. 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 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:

Frances Hutchinson

2/3/98 (904)285-6921

CR2E037 (10/97)