2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N92000000362

FILED Mar 20, 2003 Secretary of State

Entity Name: MARSH LANDING AT SAWGRASS HOMEOWNERS ASSOCIATION IV, INC.

Current Principal Place of Business: New Principal Place of Business:

4400 MARSH LANDING BLVD 4200 MARSH LANDING BLVD

STE 200 STE 3

PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address: New Mailing Address:

4400 MARSH LANDING BLVD 4200 MARSH LANDING BLVD

STE 200 STE 3

PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-3189060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JEROME S FLETCHER 1548 THE GREENS WAY SUITE 4

JACKSONVILLE BEACH, FL 32250 US

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:

Date

Name:

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

HUTCHINSON, FRANCES

(X) Change () Addition

OFFICERS AND DIRECTORS:

() Delete HUTCHINSON, FRANCES Name:

4400 MARSH LANDING BLVD. STE 3 Address: 1548 THE GREENS WAY STE 4 Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: () Delete Title: (X) Change () Addition

FLETCHER, PAUL Name: FLETCHER, PAUL Name:

Address: 4400 MARSH LANDING BLVD. STE 3 Address: 1548 THE GREENS WAY STE 4 City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: () Delete Title: DVT (X) Change () Addition

TREADWELL, FRANK E TREADWELL, FRANK E Name: Name: 4400 MARSH LANDING BLVD. STE 3 1548 THE GREENS WAY STE 4 Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCES HUTCHINSON DS 03/20/2003