

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008 8:00 am
Secretary of State

02-08-2008 90036 010 ****61.25

DOCUMENT # N93000001538

1. Entity Name
**WATER'S EDGE OF PONTE VEDRA HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**10036 SAWGRASS DRIVE
SUITE 1
PONTE VEDRA BEACH, FL 32082**

Mailing Address
**10036 SAWGRASS DRIVE
SUITE 1
PONTE VEDRA BEACH, FL 32082**

40021100



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3202245

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MAY MANAGEMENT SERVICES, INC.
5455 A1A SOUTH
SAINT AUGUSTINE, FL 32080**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2008**

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

T
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ROSBOROUGH, BRUCE
108 PATTERS WY
PONTE VEDRA BEACH, FL 32082** ☒ Delete

VP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**HURNER, BOB
265 WATER'S EDGE DRIVE S.
PONTE VEDRA BEACH, FL 32082** ☐ Change ☒ Addition

P
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CRIST, CARL
148 WATERS EDGE DRIVE N
PONTE VEDRA BEACH, FL 32082** ☐ Delete

S/T
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CASH, CHARLOTTE
280 WATER'S EDGE DRIVE S.
PONTE VEDRA BEACH, FL 32082** ☐ Change ☒ Addition

VP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CLUTE, ANNE
250 WATERS EDGE DR S.
PONTE VEDRA BEACH, FL 32082** ☒ Delete

D
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**WORM, SANDY
248 WATER'S EDGE DRIVE S.
PONTE VEDRA BEACH, FL 32082** ☐ Change ☒ Addition

☐ Delete

D
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**YOLTON, GUY
101 PATTERS WAY
PONTE VEDRA BEACH, FL 32082** ☐ Change ☒ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Date

Daytime Phone #

2/4/08 904 285 5911