

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000002313 (4)
1. Corporation Name
WESTMINISTER PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 6320 ST AUGUSTINE RD BLDG 1 JACKSONVILLE FL 32217 US	Mailing Address 6320 ST AUGUSTINE RD BLDG 1 JACKSONVILLE FL 32217-2813 US
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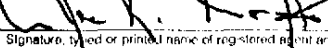
2. Principal Place of Business 21 11250 OLD ST. Augustine Rd Suite, Apt. #, etc. 22 Suite 15-132 City & State 23 Jacksonville, FL Zip 24 32257 Country 25 USA	2a. Mailing Address 26 11250 OLD ST. Augustine Rd Suite, Apt. #, etc. 27 Suite 15-132 City & State 28 Jacksonville, FL Zip 29 32257 Country 30 USA
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3. Date Incorporated or Qualified 05/05/1994	3a. Date of Last Report 04/24/1996
4. FEI Number 59-3250385	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent
**CHATHAM, PEGGY D
6320 ST AUGUSTINE RD
BLDG 1
JACKSONVILLE FL 32217**

10. Name and Address of New Registered Agent
81 Name
Alec R. Saunders
82 Street Address (P.O. Box Number is Not Acceptable)
4577 Princess Labeth Court
83 **JACK**
84 City
Jacksonville FL 85 Zip Code
32258

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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☒ DELETE	1.1 TITLE	President DPT ☒ Change ☒ Addition
NAME	EDMONDS, JAMES III	1.2 NAME	Alec R. Saunders
STREET ADDRESS	6320 ST AUGUSTINE RD BLDG 1	1.3 STREET ADDRESS	4577 Princess Labeth Ct
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	Jacksonville, FL 32258
TITLE	DVST ☒ DELETE	2.1 TITLE	VICE PRESIDENT DV ☒ Change ☒ Addition
NAME	EDMONDS, STEPHEN L	2.2 NAME	MARTIN E. THOMPSON
STREET ADDRESS	6320 ST AUGUSTINE RD BLDG 1	2.3 STREET ADDRESS	4527 PRINCESS LABETH CT.
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32258-4199
TITLE	DT ☒ DELETE	3.1 TITLE	SECRETARY ☒ Change ☒ Addition
NAME	EDMONDS, DANA	3.2 NAME	Timothy E. Trinkle
STREET ADDRESS	6320 ST AUGUSTINE RD	3.3 STREET ADDRESS	4556 PRINCESS LABETH CT.
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	JACKSONVILLE, FL 32258
TITLE	☐ DELETE	4.1 TITLE	TREASURER DPT ☒ Change ☒ Addition
NAME		4.2 NAME	STACEY BOWIE
STREET ADDRESS		4.3 STREET ADDRESS	4526 PRINCESS LABETH CT
CITY-ST-ZIP		4.4 CITY-ST-ZIP	JACKSONVILLE, FL 32258
TITLE	☐ DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

CR2E037 (9/96)