

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003854

FILED
May 04, 2009
Secretary of State

Entity Name: COLONY AT PONTE VEDRA II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

25 PONTE VEDRA COLONY CIR
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

25 PONTE VEDRA COLONY CIR
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 59-3276890 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ASHLEY, PAT
25 PONTE VEDRA COLONY CIRCLE
PONTE VEDRA, FL 32082 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ASHLEY, PAT
Address: 25 PONTE VEDRA COLONY CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VPD () Delete
Name: HERNANDEZ, MARIA
Address: 27 PONTE VEDRA COLONY CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DST () Delete
Name: WOODS, GERALDINE F
Address: 23 PONTE VEDRA COLONY CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PAT ASHLEY

PD

05/04/2009

Electronic Signature of Signing Officer or Director

Date