

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004561

FILED
Apr 13, 2009
Secretary of State

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

Current Principal Place of Business:

200 EXECUTIVE WAY
PONTE VEDRA, FL 32082 US

New Principal Place of Business:

33 PONTE VEDRA COLONY CIRCLE
PONTE VEDRA, FL 32082 US

Current Mailing Address:

200 EXECUTIVE WAY
PONTE VEDRA, FL 32082 US

New Mailing Address:

33 PONTE VEDRA COLONY CIRCLE
PONTE VEDRA, FL 32082 US

FEI Number: 59-3311714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGEMAKER, ROBERTA T/S
33 PONTE VEDRA COLONY CIRCLE
PONTE VEDRA, FL 32082 US

Name and Address of New Registered Agent:

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: P () Delete
Name: SYNAN, TRACY
Address: 1875 BEACH AVE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VP () Delete
Name: WRIGHT, JENNIFER
Address: 37 PONTE VERDA COLONY CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T () Delete
Name: WAGEMAKER, ROBERTA
Address: 33 PONTE VEDRA COLONY CIR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S () Delete
Name: WAGEMAKER, ROBERTA
Address: 33 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:

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: ROBERTA WAGEMAKER

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04/13/2009

Electronic Signature of Signing Officer or Director

Date