

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001733

1. Entity Name

HAMPTON COURT ASSOCIATION, INC.

Principal Place of Business

~~10161 CENTURION PKWY~~
~~STE 190~~
~~JACKSONVILLE FL 32256~~

Mailing Address

~~10161 CENTURION PKWY~~
~~STE 190~~
~~JACKSONVILLE FL 32256~~

2. Principal Place of Business

615 Highway A-1-A
Suite 106

3. Mailing Address

P.O. Box 805
Suite, Apt. #, etc.

City & State

Ponte Vedra Bch FL

City & State

Ponte Vedra Bch, FL

Zip

32082

Country

St. Johns

Zip

32004

Country

St. Johns

4. FEI Number

59-3502210

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIMON, BERT C

1660 PRUDENTIAL DR., STE 203
JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name Patterson, Bond & Latshaw P.A.

Street Address (P.O. Box Number is Not Acceptable)

3010 South 3rd St.

City

Jacksonville Beach FL

Zip Code

32250

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.

SIGNATURE

Savanna L. Patten

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DP
NAME BURR, EDWARD E
STREET ADDRESS 10161 CENTURION PKWY-STE 190
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ Delete

TITLE DS
NAME GRAHAM, CHERYL
STREET ADDRESS 10161 CENTURION PKWY-STE 190
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ Delete

TITLE DV
NAME HOLLAND, ROBERT
STREET ADDRESS 10161 CENTURION PKWY-STE 190
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP
NAME Hayne D. McConelichie
STREET ADDRESS 615 Highway A-1-A No.
CITY-ST-ZIP Ponte Vedra Beach, FL 32082 ☒ Change ☐ Addition

TITLE DVPST
NAME David W. Bowler
STREET ADDRESS 615 Highway A-1-A No.
CITY-ST-ZIP Ponte Vedra Beach, FL 32082 ☒ Change ☐ Addition

TITLE P
NAME LAWRENCE R. PATTERSON
STREET ADDRESS 3010 So 3rd St.
CITY-ST-ZIP Jacksonville Beach, FL 32250 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I 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 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:

Savanna L. Patten
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/01 904-285-3909

CR2E037 (10/00)

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FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90043 016 ****61.25

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