

**2001 UNIFORM BUSINESS REPORT (UBR)**

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

05-02-2001 90174 031 \*\*\*\*61.25

**DOCUMENT # N97000005348**

1. Entity Name

**SECTION 6 PROPERTY OWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

10151 Deerwood Park Blvd. Bldg. 100, Ste. 330  
 Jacksonville, FL 32256

**C0057370**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Hanson, Karl B. III  
 1019 Southside Blvd., Ste 108  
 Jacksonville, FL 32256

Name

Karl B. Hanson III

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

10151 Deerwood Park Blvd.  
 Bldg. 100, Ste. 330

City

Jacksonville

FL

Zip Code

32256

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



KARL B. HANSON III

4-17-01

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD  Delete  
 NAME: David D. Fitch  
 STREET ADDRESS: 1650 Prudential Dr., Ste 400  
 CITY-ST-ZIP: Jacksonville, FL 32207

TITLE: PD  Change  Addition  
 NAME: G. John Carey  
 STREET ADDRESS: 10151 Deerwood Park Blvd., Bldg. 100  
 CITY-ST-ZIP: Jacksonville, FL 32256 Ste 330

TITLE: DV  Delete  
 NAME: William L. Mason  
 STREET ADDRESS: 1650 Prudential Dr., Ste 400  
 CITY-ST-ZIP: Jacksonville, FL 32207

TITLE: DV  Change  Addition  
 NAME: Steven A. Stattner  
 STREET ADDRESS: 2400 N. Commerce Pkwy., Ste 405  
 CITY-ST-ZIP: Weston, FL 33326

TITLE: DV  Delete  
 NAME: G. John Carey III  
 STREET ADDRESS: 1650 Prudential Dr., Ste 400  
 CITY-ST-ZIP: Jacksonville, FL 32207

TITLE: DS  Change  Addition  
 NAME: Karl B. Hanson III  
 STREET ADDRESS: 10151 Deerwood Park Blvd., Bldg 100  
 CITY-ST-ZIP: Jacksonville, FL 32256 Ste 330

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE: VT  Change  Addition  
 NAME: M. Thompson  
 STREET ADDRESS: 10151 Deerwood Park Blvd., Bldg. 100  
 CITY-ST-ZIP: Jacksonville, FL 32256 Ste 330

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

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

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

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

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:

Melinde Thompson

4/13/01

904-565-4110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)