

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2001 8:00 am
Secretary of State

08-13-2001 90006 005 ****61.25

DOCUMENT # N98000000724

1. Entity Name

WOODLANDS AT PONTE VEDRA ASSOCIATION, INC.

Principal Place of Business

2453 SOUTH THIRD STREET
 JACKSONVILLE BEACH FL 32250

Mailing Address

2453 SOUTH THIRD STREET
 JACKSONVILLE BEACH FL 32250

2. Principal Place of Business

9889-1 San Jose Blvd

3. Mailing Address

Same.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville

City & State

Zip

Country

32257

U.S.

Zip

Country

4. FEI Number

59-3523489

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MCGARVEY, JAMES N JR.
 2453 SOUTH THIRD STREET
 JACKSONVILLE BEACH FL 32250

7. Name and Address of New Registered Agent

Name Signature Realty & Management, Inc

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

9889-1 San Jose Blvd

City Jacksonville

FL

Zip Code 32257

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

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

(NOTE: Registered Agent signature required when reinstating)

7/20/01
 DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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	D	<input checked="" type="checkbox"/> Delete
NAME	MCGARVEY, JAMES N JR.	
STREET ADDRESS	2453 SOUTH THIRD STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KELLEY, PATRICIA H	
STREET ADDRESS	2453 SOUTH THIRD STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HERRING, DINAH K	
STREET ADDRESS	2453 SOUTH THIRD STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALAN H. HERSHBERGER	
STREET ADDRESS	270 WOODCREEK DR	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM H. GARDNER	
STREET ADDRESS	412 E. WOODHAVEN DR	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HASTINGS WILLIAMS JR.	
STREET ADDRESS	244 WOODY CREEK DR	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN B. HAUG	
STREET ADDRESS	205 WOODY CREEK DR	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DONALD WALSH	
STREET ADDRESS	408 E. WOODHAVEN DR	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Alan H. Hershberger ALAN H. HERSHBERGER 8/2/01 (904) 273-0749

CR2E037 (5/01)