

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90186 028 ****61.25

DOCUMENT # N98000003347

1. Entity Name

GREATER SANS SOUCI NEIGHBORHOOD ASSOCIATION, INC

Principal Place of Business

Mailing Address

2117 SAUL DR.
 JACKSONVILLE FL 32216

POST OFFICE BOX 10212
 JACKSONVILLE FL 32247

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3514574

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEON, JOHN
 2117 SAUL DR.
 JACKSONVILLE FL 32216

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

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)

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 NAME	VP HOUSLEY, JOHN	<input type="checkbox"/> Delete
STREET ADDRESS	2113 LARRY DR W	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE NAME	S HOUSLEY, SHERRI	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2113 LARRY DR W	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE NAME	T BOWEN, SUSAN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2429 PROVOST RD E	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE NAME	D BARNES, BETTY	<input type="checkbox"/> Delete
STREET ADDRESS	2138 LARRY DR W	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE NAME	D BURRIS, ROBERT	<input type="checkbox"/> Delete
STREET ADDRESS	2807 ELISA DR W	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE NAME	D LASCO, JOHN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2470 PROVOST CT	
CITY-ST-ZIP	JACKSONVILLE FL 32216	

TITLE NAME	S BEARD, Joyce	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2243 NATHAN DR, W	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
TITLE NAME	T HALLIDAY, BILL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	1903 VALIENS DR, E	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
TITLE NAME	D SMITHAMEL, JOHN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2466 PROVOST CT	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
TITLE NAME	D DONNA DENNEY, DONNA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	6417 LOK CT.	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
TITLE NAME	D NANCY STEWART, NANCY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2121 LARRY DR, W	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
TITLE NAME	D MILDEED WETZEL, MILDEED	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2436 HIRSCH AVE	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	

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 _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joyce N. BEARD, SECRETARY
 2/5/01 (904)7248815

Date

Daytime Phone #

CR2E037 (10/00)

Attachment to:

GREATER SANS SOUCI NEIGHBORHOOD ASSN., INC. DOCUMENT

#N98000003347

BLOCK #11:

N98000003347

S

BEARD, JOYCE

2243 NATHAN DRIVE, WETS

JACKSONVILLE, FL. 32216

T.

HALLIDAY, BILL

1903 VALENS DRIVE, EAST

JACKSONVILLE, FL. 32216

D

HAMEL, JOHN

2466 PROVOST COURT

JACKSONVILLE, FL. 32216

D

DENNEY, DONNA

6417 LOU COURT

JACKSONVILLE, FL. 32216

D.

STEWART, NANCY

2121 LARRY DRIVE, WEST

JACKSONVILLE, FL. 32216

D

WETZEL, MILDRED

2436 HIRSCH AVE.

JACKSONVILLE, FL. 32216

D

ANDERSON, MIKE

2923 LORAN DR., EAST

JACKSONVILLE, FL. 32216

Joyce Beard
Joyce N. Beard
Secretary ☺