2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State
02-27-2002 90002 006 ****61.25

DOCUMENT # N98000005849

1. Entity Name

THE RESIDENCES AT WORLD GOLF VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O MAY MANAGEMENT 5455 A1A SOUTH SAINT AUGUSTINE FL 32084 US	C/O MAY MANAGEMENT PO BOX 1509 SAINT AUGUSTINE FL 32084 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
475 West Town Place	C/O May Mgt
Suite, Apt. #, etc. Suite 116	Suite, Apt. #, etc. 5455 A1A South
City & State St. Augustine, FL	City & State St Augustine FL
Zip / Country 32092 USA	32084 US

4. FEI Number 59-3541311 ☐ 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
RIDLEY, FRED S STE. 2100, ONE TAMPA CITY CENTER BUILDING 201 N. FRANKLIN ST. TAMPA FL 33601	Name: Anna Macks Street Address (P.O. Box Number is Not Acceptable): 5455 A1A South City: St Augustine FL 32080 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: Maureen K. Duffy
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 / STREET ADDRESS / CITY-ST-ZIP	PD WEBER, BRYAN 430-B ROYAL PINES PARKWAY SAINT AUGUSTINE FL 32092	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Maureen Duffy 145 N. Champions Way St. Augustine, FL 32092	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLAKE, TERI A 430-B ROYAL PINES PARKWAY SAINT AUGUSTINE FL 32092	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Dennis Craft 316 Royal Tern Road S. Ponte Vedra Beach, FL 32082	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEYMOOR, HUBERT E III 125 N CHAMPIONS WAY 313 SAINT AUGUSTINE FL 32092	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Stuart Shaines 355 North Shore Circle # 1313 St. Augustine, FL 32092	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Maureen K. Duffy FRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #