

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91888 001 ****61.25

DOCUMENT # N99000006023

1. Entity Name

WINDSOR POINTE IV, CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

10161 CENTURION PARKWAY NORTH
SUITE 150
JACKSONVILLE FL 32256

Mailing Address

10161 CENTURION PARKWAY NORTH
SUITE 150
JACKSONVILLE FL 32256

2. Principal Place of Business

13715 Richmond PK DR N

3. Mailing Address

13715 Richmond PK DR N

Suite, Apt. #, etc.

403

Suite, Apt. #, etc.

403

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

Zip

32224

Country

USA

Zip

32224

Country

USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 33-1024981

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUSS, JOHN S IV
10110 SAN JOSE BLVD.
JACKSONVILLE FL 32257

7. Name and Address of New Registered Agent

Name **RAYMOND SHAFFER**

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

13715 RICHMOND PK DR N

406

City

JACKSONVILLE

FL

Zip Code

32224

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PTD ☒ Delete
NAME SISK, JOHN K
STREET ADDRESS 10161 CENTURION PKWY N #150
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE VSD ☒ Delete
NAME NESSMITH, ERNESTINE
STREET ADDRESS 10161 CENTURION PARKWAY NORTH
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE D ☒ Delete
NAME DUSS, JOHN S IV
STREET ADDRESS 10110 SAN JOSE BLVD
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRESIDENT/DIRECTOR** ☒ Change ☐ Addition
NAME **RAYMOND SHAFFER**
STREET ADDRESS **13715 RICHMOND PK DR N. # 406**
CITY-ST-ZIP **JACKSONVILLE, FL 32224**

TITLE **VP/DIRECTOR** ☐ Change ☐ Addition
NAME **DEBRA HARVEY**
STREET ADDRESS **13715 RICHMOND PK DR N. # 407**
CITY-ST-ZIP **JACKSONVILLE, FL 32224**

TITLE **SECT/TREAS/DIRECTOR** ☐ Change ☐ Addition
NAME **BELINDA C. MONTES**
STREET ADDRESS **13715 RICHMOND PK DR N # 403**
CITY-ST-ZIP **JACKSONVILLE, FL 32224**

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

TITLE ☐ Change ☐ Addition
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:

[Signature]

4/30/2003 904-982-7223

CR2E037 (10/02)