2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State
05-17-2001 91284 026 ***150.00

DOCUMENT # P95000066598

1. Entity Name
SAN PABLO COURT, INC.

Principal Place of Business	Mailing Address
615 Hwy. A1-A Ponte Vedra, FL 32082	P.O. Box 805 Ponte Vedra, FL 32004

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
615 Hwy. A1-A	P.O. Box 805
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ponte Vedra, FL	City & State: Ponte Vedra, FL
Zip: 32082 Country: USA	Zip: 32004 Country: USA

4. FEI Number: 593342234 ☐ 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
Simon, Bert C. 1660 Prudential Drive, Suite 203 Jacksonville, FL 32207	Name: Patterson, Bond & Latshaw, P.A. Street Address (P.O. Box Number is Not Acceptable): 3010 S. Third Street City: Jacksonville Beach FL Zip Code: 32250

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: Laurena R Patterson, President 4/27/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

[redacted]

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~San Pablo Court, Inc.~~ ~~Burr, Edward E.~~ ~~101 Centurion Pkwy. North, # 190~~ ~~Jacksonville, FL 32256~~	☒ Delete	DP Hayne D. McCondichie ~~P.O Box 805~~ 615 HWY A-1-A Ponte Vedra, FL ~~32004~~ 32082	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VP David W. Bowler 615 Hwy A-1-A Ponte Vedra Beach, FL 32082	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (11/00)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David Bowler Vice President (904) 246-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #