

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000073779

1. Entity Name

~~PREFERRED GROUP AT PONTE VEDRA, INC.~~

PREMIER ASSOCIATES OF PONTE VEDRA, INC.

Principal Place of Business

3930 SAN JOSE PARK
JACKSONVILLE FL 32217

Mailing Address

3930 SAN JOSE PARK
JACKSONVILLE FL 32217-4613

2. Principal Place of Business

5150 Palm Valley Road

Suite, Apt. #, etc.

3. Mailing Address

5150 Palm Valley Road

Suite, Apt. #, etc.

City & State

Ponte Vedra Beach, FL

Zip
32082

Country
USA

City & State

Ponte Vedra Beach, FL

Zip
32082

Country
USA

4. FEI Number

59-3595448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALTERMAN, LEONARD
9116 CYPRESS GREEN DRIVE
SUITE #207
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name
BEVERLEY NEUROTH
Street Address (P.O. Box Number is Not Acceptable)
5150 Palm Valley Road
City
Ponte Vedra Beach, FL Zip Code
32082

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

Beverley Neuroth *Beverley Neuroth*

4/21/00
DATE

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

• (NOTE: Registered Agent signature required when reinstating)

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JENNINGS, JUDITH C	
STREET ADDRESS	2120 WHITE WING DIVE PLACE	
CITY-ST-ZIP	JACKSONVILLE FL 32217	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JENNINGS, PEGGY	
STREET ADDRESS	8454 ROYALWOOD DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WARREN, PEGGY	
STREET ADDRESS	5150 PALM VALLEY ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WARREN, CARLOS S.	
STREET ADDRESS	5150 PALM VALLEY ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEUROTH, KENNETH H.	
STREET ADDRESS	5150 PALM VALLEY ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 an other-like empowered.

SIGNATURE:

Kenneth H. Neuroth 4/21/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

May 02, 2000 8:00 am
Secretary of State

05-02-2000 90026 034 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)