

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002418

**Entity Name:** THE BOXWOOD AT BAYMEADOWS CONDOMINIUM  
ASSOCIATION, INC.

**Current Principal Place of Business:**

5991 CHESTER AVE #203  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

5991 CHESTER AVE #203  
JACKSONVILLE, FL 32217 US

**FEI Number:** 55-0824812

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INTERLACED PROPERTY SOLUTIONS, LLC  
5991 CHESTER AVE #203  
JACKSONVILLE, FL 32217 US

*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:** PATRICIA BENNETT

03/06/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name ROMAGE, LAURA  
Address 5991 CHESTER AVE #203  
City-State-Zip: JACKSONVILLE FL 32217

Title PRESIDENT  
Name REEVES, MARY ELLEN  
Address 5991 CHESTER AVE #203  
City-State-Zip: JACKSONVILLE FL 32217

Title VP  
Name WELLS, AL  
Address 5991 CHESTER AVE #203  
City-State-Zip: JACKSONVILLE FL 32217

Title TREASURER  
Name YURASHUS, ANITA  
Address 5991 CHESTER AVE #203  
City-State-Zip: JACKSONVILLE FL 32217

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARYELLEN REEVES

PRESIDENT

03/06/2019

Electronic Signature of Signing Officer/Director Detail

Date