

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010664

**FILED**  
**Jan 26, 2015**  
**Secretary of State**  
**CC9828929268**

**Entity Name:** PARK PLACE AT THE AVENUES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6101 GAZEBO PARK PLACE N  
SUITE 101  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

10751 ALTA DRIVE  
JACKSONVILLE, FL 32226

**FEI Number: 14-1908046**

**Certificate of Status Desired: No**

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

SPINNER, WILLIAM T  
10751 ALTA DRIVE  
JACKSONVILLE, FL 32226 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name SHEFFIELD, J. HOWARD  
Address 6101 GAZEBO PARK PLACE N  
City-State-Zip: JACKSONVILLE FL 32257

Title SD  
Name BOATRIGHT, SCOTT R  
Address 6101 GAZEBO PARK PLACE N  
City-State-Zip: JACKSONVILLE FL 32257

Title TD  
Name SPINNER, WILLIAM T  
Address 10751 ALTA DRIVE  
City-State-Zip: JACKSONVILLE FL 32226

*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: WILLIAM T. SPINNER**

**TREASURER**

**01/26/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date