

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23977

Entity Name: THE INNLET AT PONTE VEDRA BEACH MASTER ASSOCIATION, INC.**Current Principal Place of Business:**11555 CENTRAL PARKWAY, #404
JACKSONVILLE, FL 32224**Current Mailing Address:**3545 ST. JOHNS BLUFF RD. S., #301
JACKSONVILLE, FL 32224 US**FEI Number: 59-3644033****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**J & R PROPERTY SERVICES, INC
11155 CENTRAL PARKWAY, #404
JACKSONVILLE, FL 32224 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: KEN FRICK****02/18/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HOTES, JOHN
Address 3545 ST. JOHNS BLUFF RD. S., #301
City-State-Zip: JACKSONVILLE FL 32224

Title SECRETARY
Name PICKERING, RANDELL T
Address 3545 ST. JOHNS BLUFF RD. S., #301
City-State-Zip: JACKSONVILLE FL 32224

Title D
Name MERLINI, PETER
Address 3545 ST. JOHNS BLUFF RD. S., #301
City-State-Zip: JACKSONVILLE FL 32224

Title TREASURER
Name STRICKLAND, COLLETTE
Address 3545 ST. JOHNS BLUFF RD. S., #301
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name DOMINGUEZ, CHARLES
Address 3545 ST. JOHNS BLUFF RD. S., #301
City-State-Zip: JACKSONVILLE FL 32224

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: JOHN HOTES**PRESIDENT****02/18/2017**

Electronic Signature of Signing Officer/Director Detail

Date