

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90010 013 ****61.25

DOCUMENT # 729238

1. Entity Name
EAGLE BEND ISLAND ASSOCIATION, INC.

Principal Place of Business PO BOX 26576 JACKSONVILLE FL 32226-6576 US	Mailing Address PO BOX 26576 JACKSONVILLE FL 32226-6576 US
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

4. FEI Number 59-2239346	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
-----	---------	-----	---------	--

6. Name and Address of Current Registered Agent
THOMAS, D. GRAY
1199 EAGLE BEND COURT
JACKSONVILLE FL 32226

7. Name and Address of New Registered Agent
 Name **DESMOND, JANET R.**
 Street Address (P.O. Box Number's Not Acceptable)
17000 DORADO CIRCLE
 City **JACKSONVILLE FL** Zip Code **32226**

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 *Janet R. Desmond* **JANET R. DESMOND, PRESIDENT** 4/24/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADAM, PAUL 17234 RIVER ISLE CIRCLE JACKSONVILLE FL 32226 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMAS, D. GRAY 1199 EAGLE BEND COURT JACKSONVILLE FL 32226 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OLIVER, DIANA 17299 EAGLE BEND BLVD JACKSONVILLE FL 32226 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JUSTUS, RICHARD 1248 BEEKMAN ROAD JACKSONVILLE FL 32226 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DESMOND, JANET 17000 DORADO CIRCLE JACKSONVILLE FL 32226 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSHER, HARRY 1174 EAGLE BEND COURT JACKSONVILLE FL 32226 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DESMOND, JANET 17000 DORADO CIRCLE JACKSONVILLE, FL 32226 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D THOMAS, D. GRAY 1199 EAGLE BEND COURT JACKSONVILLE, FL 32226 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D PHILLIPS, BONNIE 17560 MONTESSA TERRACE JACKSONVILLE, FL 32226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERDUE, JR, JOHN 17118 DORADO CIRCLE JACKSONVILLE, FL 32226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRITZ, BARBARA 17296 HOLMES MILL AVENUE JACKSONVILLE, FL 32226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKINSON, LES 16946 ELSINORE DRIVE JACKSONVILLE, FL 32226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Janet R. Desmond* **JANET R. DESMOND** 4/24/01 904-757-1022
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (10/00)

2001 UNIFORM BUSINESS REPORT Attachment
729238 831737 P.2.
Doc. # 729238

TITLE V/D
NAME JUSTUS, RICHARD
ADDRESS 1248 BEEKMAN ROAD
CITY-ST-ZIP JACKSONVILLE, FL 32226

CHANGE
(OF TITLE)
CORRECTION

Janet R. Desmond, PRESIDENT 4/24/01