## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#761600** 

FILED Mar 01, 2004 Secretary of State

Entity Name: SEA OATS BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 562 1720 GULF BOULEVARD 1720 GULF BLVD ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 **New Mailing Address: Current Mailing Address:** PO BOX 510562 PO BOX 510562 1720 GULF BLVD PUNTA GORDA, FL 33951 US ENGLEWOOD, FL 34223 US FEI Number: 59-2445809 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEBB, SANKEY E III C/O WEBB, LORAH & CO., P.L., CPA'S 1625 W. MÁRION AVE., SŤE. 6 PUNTA GORDA, FL 33950 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition DESGUIN, L V DESGUIN, L V Name: Name: 5050 MELBOURNE Address: 5050 MELBOURNE Address: City-St-Zip: CHARLOTTE HARBOR, FL City-St-Zip: CHARLOTTE HARBOR, FL Title: PD () Delete Title: (X) Change ( ) Addition KNIGHT, ARLENE, Name: KNIGHT, ARLENE, Name: Address: 351 OAK STREET Address: 351 OAK STREET City-St-Zip: ENGLEWOOD, FL City-St-Zip: ENGLEWOOD, FL Title: () Delete Title: () Change () Addition BIEHL, DANNY Name: Name: 1601 TAMIAMI TRAIL Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition WALDROP J ROBERT, Name: Name: WALDROP, J ROBERT Address: 149 SMALL ST Address: 149 SMALL ST City-St-Zip: PORT CHARLOTTE, FL City-St-Zip: PORT CHARLOTTE, FL Title: () Delete Title: () Change () Addition BIBENS, MERRILL Name: Name: 405 PINE HOLLOW CIRCLE Address: Address: City-St-Zip: ENGLEWOOD, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: L. VICTOR DESGUIN P 03/01/2004