

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761600

FILED  
Jan 05, 2012  
Secretary of State

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

**Current Principal Place of Business:**

1720 GULF BOULEVARD  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 510562  
PUNTA GORDA, FL 33951 US

**New Mailing Address:**

FEI Number: 59-2445809      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WEBB, SANKEY E III  
C/O WEBB, LORAH & CO., P.L., CPA'S  
1107 WEST MARION AVENUE STE 115  
PUNTA GORDA, FL 33950 US

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

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:**

Title: PD  
Name: DESGUIN, L V  
Address: 1497 CAPEL STREET  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D  
Name: BIEHL, DANNY  
Address: 1601 TAMiami TRAIL  
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD  
Name: WALDROP, J ROBERT  
Address: 1236 RED OAK LANE  
City-St-Zip: PORT CHARLOTTE, FL 339482179

Title: D  
Name: CRONIN, JOSEPH  
Address: 6505 HIGHWAY 301N - #B-3  
City-St-Zip: ELLENTON, FL 34222

Title: D  
Name: HOWETT, RICHARD  
Address: 5331 LADY SLIPPER AVENUE  
City-St-Zip: NORTH PORT, FL 34291

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: VICTOR DESGUIN

P

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date