## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002818

FILED Apr 29, 2004 Secretary of State

Entity Name: OCEAN CAY AT AMELIA ISLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2215 EAST SR 200 463499 STATE ROAD 200 YULEE, FL 32097 YULEE, FL 32097 **Current Mailing Address: New Mailing Address:** PO BOX 1987 PO BOX 1987 YULEE, FL 320411987 YULEE, FL 320411987 US FEI Number: 59-3676709 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: POWELL, TERRELL J POWELL, TERRELL J 463499 STATE ROAD 200 2215 E SR 200 YULEE, FL 32097 YULEE, FL 32097 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: 04/29/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition GORE, KENNETH A LYLE, MARK Name: Name: 12854 KENAN DRIVE #100 Address: 407 GEORGIA AVENUE Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: PD () Delete Title: (X) Change ( ) Addition BEARD, WIRT A JR. Name: FOUTZ, MARK Name: Address: 12854 KENAN DRIVE #100 Address: 2611 PORTSIDE DRIVE City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: STD () Delete Title: (X) Change ( ) Addition MCGREGOR, DEBRA Name: MONROE, CHARLIE Name: 417 GEORGIA AVENUE Address: 12854 KENAN DRIVE #100 Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: ( ) Change (X) Addition Name: Name: CRABB, NANCIE 399 PORTSIDE DRIVE Address: Address: City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: ( ) Change (X) Addition AUSTIN, CATHY Name: Name: 2622 GEORGIA AVENUE Address: Address: FERNANDINA BEACH, FL 32034 City-St-Zip: 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: MARK LYLE D 04/29/2004