

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90216 009 ****61.25

DOCUMENT # N01000007804

1. Entity Name

OCEAN PARK (ON AMELIA ISLAND) CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1010-A ATLANTIC AVE.
 FERNANDINA BEACH FL 32034

PO BOX 15388
 FERNANDINA BEACH FL 32035

2. Principal Place of Business

3. Mailing Address

403 Tarpon Ave

403 Tarpon Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Fernandina Beach FL

Fernandina Beach FL

4. FEI Number

Applied For

59-3755529

Not Applicable

Zip

Country

Zip

Country

32034

USA

32034

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNDERWOOD, HERBERT L JR
 1010-A ATLANTIC AVE.
 FERNANDINA BEACH FL 32304

Name **Herbert L Underwood**

Street Address (P.O. Box Number is Not Acceptable)
UNIT 401

403 Tarpon Ave

City **Fernandina Beach FL**

Zip Code **32034**

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

Herbert L Underwood -AGENT

(NOTE: Registered Agent signature required when reinstating)

4/15/02
 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DV	<input type="checkbox"/> Delete
NAME	UNDERWOOD, HERBERT L	
STREET ADDRESS	PO BOX 15388	
CITY-ST-ZIP	FERNANDINA BEACH FL 32035	
TITLE	DP	<input type="checkbox"/> Delete
NAME	UNDERWOOD, HERBERT L JR	
STREET ADDRESS	PO BOX 15388	
CITY-ST-ZIP	FERNANDINA BEACH FL 32035	
TITLE	DST	<input type="checkbox"/> Delete
NAME	UNDERWOOD, JOHN A	
STREET ADDRESS	PO BOX 15388	
CITY-ST-ZIP	FERNANDINA BEACH FL 32035	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 reports 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Herbert L Underwood VP Herbert L Underwood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(804) 321-1119

CR2E037 (9/01)