

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004216

FILED
Apr 16, 2008
Secretary of State

Entity Name: OCEAN WALK OF AMELIA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1987
YULEE, FL 320411987 US

New Mailing Address:

FEI Number: 59-3216836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC
463499 STATE ROAD 200
YULEE, FL 32097 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: P/D () Delete
Name: ROYAL-JONES, NANCY
Address: 4941 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: V/D () Delete
Name: REDDING, RONALD
Address: 4917 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: V/D () Delete
Name: WEST, WALT D
Address: 4981 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: S/D () Delete
Name: JOHNSON, SUSAN P
Address: 4973 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: T/D () Delete
Name: BEEMAN, DAVID
Address: 4938 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP/D (X) Change () Addition
Name: WEST, WALTER D
Address: 4981 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: VP/D (X) Change () Addition
Name: CUTLER, WILLIAM C
Address: 4968 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: S/D (X) Change () Addition
Name: HOLMES, ANN E
Address: 4976 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TERRELL J POWELL

RA

04/16/2008

Electronic Signature of Signing Officer or Director

Date