

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005708

**FILED
Apr 30, 2004
Secretary of State**

Entity Name: SOUTH BEACH CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

MARVIN REAL ESTATE
1835 N 3RD ST
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

PO BOX 330026
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number: 59-3362969 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARVIN, SONIA
1835 N 3RD ST
JACKSONVILLE BEACH, FL 32250

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: TD () Delete
Name: HASELDEN, EDWARD
Address: 1224 S 1ST STREET #2-C
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD () Delete
Name: SELLERS, CHARLES W
Address: 1224 1ST ST S, UNIT 2A
City-St-Zip: JACKSONVILLE, FL 32250

Title: DS () Delete
Name: CONWAY, RICHARD
Address: 1224 S 1ST STREET #3-C
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: SELLERS, COLETTE
Address: 1224 1ST S, UNIT 2A
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: EVERIDGE, HERMAN
Address: 1224 1ST ST S, UNIT 1C
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: CHARLES W SELLERS

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date