

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000078

FILED
Jan 13, 2004
Secretary of State

Entity Name: SOUTH PABLO BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

374 SOUTH 1ST STREET
JACKSONVILLE, FL 32250

New Principal Place of Business:

388 SOUTH 1ST STREET
JACKSONVILLE, FL 32250

Current Mailing Address:

374 SOUTH 1ST STREET
JACKSONVILLE, FL 32250

New Mailing Address:

388 SOUTH 1ST STREET
JACKSONVILLE, FL 32250

FEI Number: 59-3487226 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:

STAMATOIANNAKIS, ALIXE MRS
388 SOUTH 1ST STREET
JACKSONVILLE, FL 32250

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: ALIXE STAMATOIANNAKIS 01/13/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HELLER, LISA
Address: 374 SOUTH 1ST ST
City-St-Zip: JACKSONVILLE, FL 32250

Title: ~~BM~~ (X) Change (X) Addition
Name: ~~HELLER, LISA~~ STAMATOIANNAKIS, ALIXE
Address: ~~374 SOUTH 1ST ST~~ 388 SOUTH 1ST STREET #405
City-St-Zip: ~~JACKSONVILLE, FL 32250~~ JACKSONVILLE, FL 32250

Title: STD () Delete
Name: BATTAGLIA, LORY NICOLE
Address: 388 1ST. STREET SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: BM () Change (X) Addition
Name: SOLIS, GREG
Address: 382 SOUTH 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32250

Title: VD () Delete
Name: YALES, BONNIE
Address: 384 1ST. STREET SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: ALIXE STAMATOIANNAKIS PD 01/13/2004
Electronic Signature of Signing Officer or Director Date