

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760076

**Entity Name:** ST. AUGUSTINE OCEAN & RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Apr 16, 2013**  
**Secretary of State**  
**CC0317140118****Current Principal Place of Business:**880 A1A BEACH BOULEVARD  
ST. AUGUSTINE, FL 32080**Current Mailing Address:**C/O SOVEREIGN & JACOBS PROPERTY MANAGEMENT  
461 A1A BEACH BLVD  
ST. AUGUSTINE, FL 32080 US**FEI Number: 59-2389780****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LUMPKIN, ELLEN  
461 A1A BEACH BLVD  
SAINT AUGUSTINE, FL 32080 US*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**Officer/Director Detail :**

Title	PD
Name	WELSH, DONALD
Address	880 A1A BEACH BLVD UNIT3320
City-State-Zip:	ST AUGUSTINE FL 32080

Title	DIRECTOR
Name	KUHN, CAROL
Address	5040 CYPRESS LINKS BLVD.
City-State-Zip:	ELKTON FL 32033

Title	D
Name	DAVIS, DONALD
Address	880 A1A BEACH BLVD., UNIT 7201
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	SECRETARY
Name	DUDDY, WILLIAM
Address	880 A1A BEACH BLVD., UNIT 1105
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	VP
Name	ROBERT, JONES
Address	4140 TASSEFF TERRACE
City-State-Zip:	HAMBURG NY 14075

Title	TD
Name	SAWINSKI, JACK
Address	772 EL VERGEL LANE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	VP
Name	FINGER, EUGENE
Address	880 A1A BEACH BLVD., UNIT 3325
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	DIRECTOR
Name	KANEB, EDWARD
Address	182 HIGHLAND ROAD
City-State-Zip:	MESSENA NY 13662

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE: DONALD WELSH****PRESIDENT****04/16/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	WITTREICH, YVONNE
Address	1001 EAST DOUGLAS ROAD
City-State-Zip:	FORT COLLINS CO 80524