

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006911

**FILED**  
**Jan 05, 2018**  
**Secretary of State**  
**CC1809761208**

**Entity Name:** VILLAS OF OCEAN GATE II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

125 OCEAN HIBISCUS DRIVE  
ST AUGUSTINE, FL 32080

**Current Mailing Address:**

125 OCEAN HIBISCUS DRIVE  
ST AUGUSTINE, FL 32080 US

**FEI Number:** 14-1972229

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SELLERS, CATHLEEN  
125 OCEAN HIBISCUS DR.  
ST 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            SECRETARY  
Name            BAMBERG, JONATHAN B  
Address        6275 A1A SOUTH, SUITE 103  
City-State-Zip: ST AUGUSTINE FL 32080

Title            DIRECTOR  
Name            KOHOUTEK, VINCENT JR  
Address        202 SOUTH OXALIS DRIVE  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title            VP  
Name            DITTMAN, STEVE  
Address        264 GIBRALTAR COURT  
                  #301  
City-State-Zip: ST. AUGUSTINE FL 32080

Title            PRESIDENT  
Name            DIXON, GERALD  
Address        264 GIBRALTAR COURT  
                  #303  
City-State-Zip: ST. AUGUSTINE FL 32080

Title            TREASURER  
Name            KLABE, JAMES  
Address        37 WOODWARD DRIVE  
City-State-Zip: WILMINGTON DE 19808

*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:** GERALD DIXON

**PRESIDENT**

**01/05/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date