

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90123 028 ****61.25

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1. Entity Name
SPANISH OAKS CONDOMINIUM, INC.



Principal Place of Business
715 20TH ST APT 109
VERO BEACH, FL 32960

Mailing Address
715 20TH ST APT 109
VERO BEACH, FL 32960

50007107



02212006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1513354

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

COOPER, MARJORIE
715 20TH STREET, #203
VERO BEACH, FL 32960

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Marjorie A Cooper* 3/20-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	
NAME	COOPER, MARJORIE	<i>Grady M. Cooper</i>
STREET ADDRESS	715 20TH STREET 203	<i>715-20th St #107</i>
CITY-ST-ZIP	VERO BEACH, FL 32960	<i>V.B. 32960</i>
TITLE	ST	
NAME	CLARK, MARJORIE	<i>MARJORIE Cooper</i>
STREET ADDRESS	715 20TH ST	<i>715-20th St #104</i>
CITY-ST-ZIP	VERO BEACH, FL 32960	<i>V.B. 32960</i>
TITLE	V	
NAME	CAPPELLO, GINA	<i>moved</i>
STREET ADDRESS	715 20TH STREET, #201	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE	D	
NAME	DELANCEY, BETH	<i>Doug King #</i>
STREET ADDRESS	715 20TH ST APT 109	<i>715-20th St. 208</i>
CITY-ST-ZIP	VERO BEACH, FL	
TITLE	VP	
NAME	COOPER, GRANT	<i>moved</i>
STREET ADDRESS	715 20TH STREET 205	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE	M	
NAME	SILL, JANET	
STREET ADDRESS	715 -20TH ST #102	
CITY-ST-ZIP	VERO BEACH, FL 32960	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marjorie A Cooper*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20-06 772-778-6940
Date Daytime Phone #