2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2004 8:00 am
Secretary of State
02-18-2004 90025 002 ****70.00

DOCUMENT # 728528

1. Entity Name

TREASURE BEACH PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6336 COASTANERO RD. ST. AUGUSTINE FL 32080 US	6336 COASTANERO RD. ST. AUGUSTINE FL 32080 US

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
253 Treasure Beach Rd.	253 Treasure Beach Rd.
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: St Augustine - Florida	City & State: St Augustine - Florida
Zip: 32080 Country:	Zip: 32080 Country:

4. FEI Number: 23-7422286 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JEPSON, WILLIAM
6336 COSTANERO RD.
ST SUGUSTINE FL 32080

7. Name and Address of New Registered Agent

Name: DOUGLAS J. MARTIN
Street Address (P.O. Box Number is Not Acceptable): 253 TREASURE BEACH ROAD
City: ST. AUGUSTINE FL Zip Code: 32080

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: Douglas J. Martin
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 2/2/2004

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JOHNSON, GERALDINE F 6097 ROJO ROAD ST AUGUSTINE FL 32080	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1VPD Norman Welbrake 5971 Costanera St Augustine FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1VPD MARTIN, DOUGLAS 253 TREASURE BEACH RD. ST. AUGUSTINE FL 32080	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1VPD Norman Welbrake 5971 Costanera St Augustine FL 32080	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2VPD GAJ, LOUIS 279 VILLA VERDA RD ST. AUGUSTINE FL 32080	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD COLVIN, KEITH 6340 GOMEZ RD. SAINT AUGUSTINE FL 32080	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RS PAEKER, WANDA 5900 RIO ROYALLE RD. ST. AUGUSTINE FL 32080	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CS KOZLOWSKI, HELEN 6339 GOMEZ RD. ST. AUGUSTINE FL 32080	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Douglas J. Martin PRESIDENT 2/12/04 (904)461-9056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #