

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90374 010 ****70.00

DOCUMENT # 753193

1. Entity Name
**LOBLOLLY BAY PROPERTY OWNERS' ASSOCIATION,
INCORPORATED**



Principal Place of Business
**7407 SE HILL TERRACE
HOBE SOUND, FL 33455**

Mailing Address
**7407 SE HILL TERRACE
HOBE SOUND, FL 33455**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01202006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-2069808

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORNETT, JANE
401 E. OSCEOLA ST
STUART, FL 34994**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE V
NAME SHARP, M. RUST ☐ Delete
STREET ADDRESS 7771 SE LITTLE HARBOUR DR.
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE P
NAME SHAW, CHARLES ☒ Delete
STREET ADDRESS 8029 S.E. LITTLE HARBOUR DR
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE D
NAME ODDEN, LANCE ☐ Delete
STREET ADDRESS 7810 SE LITTLE HARBOUR DRIVE B-2
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE ST
NAME CONNER, BILL ☐ Delete
STREET ADDRESS 7603 S.E. SANDERLING PLACE
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE D
NAME BELL, ELEANOR ☐ Delete
STREET ADDRESS 7950 SE DOCK STREET 35
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME JOHN JONES ☒ Change ☐ Addition
STREET ADDRESS 1751 SE Loblolly Bay Dr. Hobe Sound, FL 33455
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

William B Conner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/17/06

772 545-1065