

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90115 032 ****61.25

DOCUMENT # 758665

1. Entity Name
**EMERALD ISLES PHASE II TOWNHOMES OWNERS
ASSOCIATION, INC.**



Principal Place of Business
**BOX 372945
SATELLITE BCH., FL 32937**

Mailing Address
**BOX 372945
SATELLITE BCH., FL 32937**

DO NOT WRITE IN THIS SPACE



01252006 No Chg-NP CR2E037 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SEIBERT, JOHN E
79 EMERALD COURT
SATELLITE BEACH, FL 32937**

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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

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 **SD**
NAME
STREET ADDRESS
CITY-ST-ZIP
**T D
SEIBERT, JOHN E
79 EMERALD COURT
SATELLITE BEACH, FL 32937**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
IVERS, PATTY
82 EMERALD COURT
SATELLITE BEACH, FL 32937**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
HOAG, MONA
85 EMERALD COURT
SATELLITE BEACH, FL 32937**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
DELASHMUTT, BRANTLEY
54 EMERALD COURT
SATELLITE BEACH, FL 32937**

TITLE **SD**
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Ragda Michelle
57 Emerald Court
Satellite Beach, FL 32937**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

John E. Seibert **JOHN E. SEIBERT**
(Treasurer)

3/2/06 **C32D 773-1512**

Date

Daytime Phone #