

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 761571

1. Entity Name

THE OCEANS OF AMELIA CONDOMINIUM ASSOCIATION, IN

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90187 039 ****61.25

Principal Place of Business

Mailing Address

382 SO. FLETCHER AVE.
FERNANDINA BEACH FL 32034

382 SO. FLETCHER AVE.
FERNANDINA BEACH FL 32034-4809

900562



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2348207

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~EORD, ROBERT A.~~
~~8030 HARTLEY, SUITE 200~~
~~JACKSONVILLE FL 32257~~

ROBERT PETERS
2855 OCEAN DRIVE
FERNANDINA BEACH,
FLA 32034

Name

ROBERT PETERS

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

2855 OCEAN DRIVE

FERNANDINA BEACH

City

FL

Zip Code

32034

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HENRY, JUNE R
1919 SUNRISE DRIVE
FERNANDINA BEACH FL 32034

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

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
MD
MCNEAL, FRED
3042 SIMPSON PARK ROAD
GAINESVILLE GA 30606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
WILLIAM McLAUGHLIN
382 SOUTH FLETCHER AVE
FERNANDINA BEACH, FLA 32034

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
McLAUGHLIN, PATRICIA
382 SOUTH FLETCHER AVENUE
FERNANDINA BEACH FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
MD
MCNEAL, SUSAN
382 S FLETCHER AVE
FERNANDINA BCH FL

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

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
SCANLAN, JOE SALLY HARLOW
382 S FLETCHER AVE 382 S FLETCHER AVE
FERNANDINA BEACH FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
SALLY HARLOW
382 SOUTH FLETCHER AVE
FERNANDINA BEACH FLA 32034

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
MD
CLAY, CLARENCE BRAD KYZER
382 S FLETCHER AVE 4259 KYZER LANE
FERNANDINA BEACH FL HEPH ZIBAH GA

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
BRAD KYZER
4259 KYZER LANE
HEPH ZIBAH, GEORGIA 30815

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:

SIGNATURE REQUIRED

June R Henry

(904) 491-3322

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

66/ 137 9/99