

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90030 024 ****61.25

DOCUMENT # 761571

1. Entity Name

THE OCEANS OF AMELIA CONDOMINIUM ASSOCIATION, IN

Principal Place of Business

382 SO. FLETCHER AVE.
FERNANDINA BEACH FL 32034

Mailing Address

382 SO. FLETCHER AVE.
FERNANDINA BEACH FL 32034

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2348207

Applied For

Not Applicable

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

PETERS, ROBERT L ESQ.
311 CENTRE ST., TE. 204
FERNANDINA BEACH FL 32034

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.

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Maintenance Director ☐ Change ☒ Addition
Charles Texeira
382 S. Fletcher Ave.
Fernandina Beach, FL 32034

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MD
MC LAUGHLIN, WILLIAM (McLaughlin) sp.
382 S FLETCHER AVE
FERNANDINA BEACH FL 32034 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Maintenance Director ☐ Change ☒ Addition
Terry Stover
359 Moeckel Place
St. Mary's GA 31558

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD (Sec.)
MCNEAL, SUSAN
382 S FLETCHER AVE
FERNANDINA BCH FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
HARLON, SALLY
382 S FLETCHER AVE
FERNANDINA BEACH FL 32034 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MD
KYZER, BRAD
4259 KYZER LANE
HEPHZIBAH GA 30815 ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904) 491-3322

1-24-2001

Date

Daytime Phone #

CR2E037 (10/00)