

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2002 8:00 am
Secretary of State

02-01-2002 90024 016 ****61.25

DOCUMENT # 761571

1. Entity Name

THE OCEANS OF AMELIA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**382 SO. FLETCHER AVE.
 FERNANDINA BEACH FL 32034**

**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



DO NOT WRITE IN THIS SPACE

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

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

TITLE Treasurer, Director ☐ Change ☒ Addition
 NAME Scanlan, Joe
 STREET ADDRESS 585 Fasters Mill Lane
 CITY-ST-ZIP Suwanee, GA 30024

TITLE MD ☒ Delete
 NAME MC LAUCHUN, WILLIAM
 STREET ADDRESS 382 S FLETCHER AVE
 CITY-ST-ZIP FERNANDINA BEACH FL 32034

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

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

TITLE Moderator, Director ☐ Change ☒ Addition
 NAME Mc Connell, L.A.
 STREET ADDRESS 101 Bear Lake Dr.
 CITY-ST-ZIP Warner Robbins, GA 31088

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

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

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

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

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

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

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
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President
J. Henry

1/12/02

261-4013

CR2E037 (9/01)