

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761571

FILED
Apr 29, 2009
Secretary of State

Entity Name: THE OCEANS OF AMELIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

382 SO. FLETCHER AVE.
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

382 SO. FLETCHER AVE.
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 59-2348207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERA FERNANDINE BEACH REALTY
2057 SOUTH FLETCHER AVE
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

ERA FERNANDINA BEACH REALTY
2057 SOUTH FLETCHER AVE
FERNANDINA BEACH, FL 32034 US

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: ERA FERNANDINA BEACH REALTY

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EATON, MARC
Address: 382 S. FLETCHER AVE #202
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: FOOTE, GEORGE
Address: 430 WISTERIA CIRCLE
City-St-Zip: ROSWELL, GA 30076

Title: M () Delete
Name: MCLAUGHLIN, PATRICIA
Address: 382 S. FLETCHER AVE.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T () Delete
Name: LEWIS, ED
Address: 4596 VILLAGE DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: KELLUM, H.C.
Address: 2127 LAKESIDE DR SOUTH
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA MCLAUGHLIN

#3

04/29/2009

Electronic Signature of Signing Officer or Director

Date