

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90051 016 ****61.25

DOCUMENT # 769937

1. Entity Name

SEA OATES VILLAS CONDOMINIUM, INC.



Principal Place of Business

C/O BENN EILERT
TWO E STREET #2
SAINT AUGUSTINE BEACH FL 32080

Mailing Address

WANDA S. CHAMBERS
105 SPANISH OAKS LANE
SAINT AUGUSTINE BEACH FL 32080



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2552670

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHAMBERS, WANDA S
105 SPANISH OAKS LANE
ST. AUGUSTINE FL 32080

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Wanda S. Chambers

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

Wanda S. Chambers

(NOTE: Registered Agent signature required when reconstituting)

2/9/06

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME FIELDS, CHARLES E JR
STREET ADDRESS 100 10TH ST SE
CITY-STATE-ZIP WINTER HAVEN FL 33880

TITLE VPD ☐ Delete
NAME EILERT, BENN E
STREET ADDRESS 2E ST #2
CITY-STATE-ZIP ST AUGUSTINE BEACH FL 32084

TITLE S ☐ Delete
NAME CHAMBERS, WANDA
STREET ADDRESS 105 SPANISH OAKS LANE
CITY-STATE-ZIP ST. AUGUSTINE FL 32080

TITLE D ☐ Delete
NAME PATRICK, MARK R.
STREET ADDRESS 4040 WOODCOCK DRIVE SUITE 230
CITY-STATE-ZIP JACKSONVILLE FL 32207

TITLE PD/S ☐ Delete
NAME JOYNER, ELLIS WAYNE
STREET ADDRESS 1490S N.W. 94TH AVENUE
CITY-STATE-ZIP ALACHUA FL 32615

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT DIRECTOR ☐ Change ☒ Addition
NAME Edward Strange
STREET ADDRESS 2 E STREET, #7
CITY-STATE-ZIP St. Augustine, FL 32080

TITLE DIRECTOR ☒ Change ☐ Addition
NAME ELLIS WAYNE JOYNER
STREET ADDRESS
CITY-STATE-ZIP

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Wanda S. Chambers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/06 (904) 814-7813

Date

Daytime Phone #