


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

**FILED**  
**Apr 28, 2006 8:00 am**  
**Secretary of State**

04-28-2006 90147 032 \*\*\*\*61.25

<b>DOCUMENT # N00394</b>	
1. Entity Name <b>THE COTTAGES OF SEA OAKS HOMEOWNERS ASSOCIATION, INC.</b>	

Principal Place of Business <b>1235 WINDING OAKS CIRCLE VERO BEACH FL 32963-1020</b>	Mailing Address <b>1235 WINDING OAKS CIRCLE VERO BEACH FL 32963-1020</b>
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2. Principal Place of Business <b>8811 A1A</b>	3. Mailing Address <b>8811 A1A</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State <b>Vero Beach, FL</b>	City & State <b>Vero Beach, FL</b>
Zip <b>32963</b>	Zip <b>32963</b>
Country	Country

4. FEI Number <b>59-2439829</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent <b>PAMELA DAWSON. 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963-1020</b>	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	Zip Code

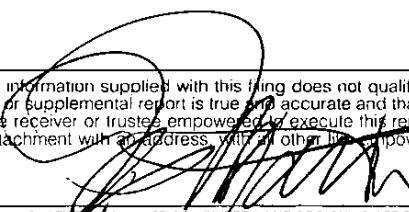
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **PAMELA DAWSON, Managing Agent** **3-30-06**  
(NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WARBURTON, MICKEY 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8811 Hwy A1A</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FERGUSON, JOHN 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8811 Hwy A1A</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HILL, HARRY 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8811 Hwy A1A</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EMCH, WILLARD 1235 WINDING OAKS CIR. VERO BEACH FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8811 Hwy A1A</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KREIDLER, DAVID 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8811 Hwy A1A</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 an other filing, or otherwise.

SIGNATURE:  **mickey warburton** **3/13/06** **772-231-2154**