FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 28 PM 6:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N02338** **(4)**

1. Corporation Name

SEA OATS OF JUNO BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
601 SEA OATS DR. JUNO BEACH FL 33408	601 SEA OATS DR. JUNO BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/03/1984
3a. Date of Last Report: 07/22/1994
4. FEI Number: 59-2483919 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
COLLINS, ANN 202C SEA OATS DR JUNO BCH FL 33408	81 Name: BEATRICE N KOHNLE 82 Street Address (P.O. Box Number is Not Acceptable): 201D SEA OATS DRIVE 83: JUNO BEACH, FL 33408 84 City: JUNO BEACH **FL** 85 Zip Code: 33408

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Beatrice N Kohnle — BEATRICE N KOHNLE PRESIDENT — 4/24/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	COLLINS, ANN	1.2 NAME	KOHNLE, BEATRICE N.	
STREET ADDRESS	202C SEA OATS DR	1.3 STREET ADDRESS	201D SEA OATS DRIVE	
CITY-ST-ZIP	JUNO BCH FL	1.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
TITLE	SD	2.1 TITLE	SD	☒ Change ☐ Addition
NAME	ELLIOT, OWEN	2.2 NAME	ANDERSEN, LOWELL	
STREET ADDRESS	203D SEA OATS DR	2.3 STREET ADDRESS	205F SEA OATS DRIVE	
CITY-ST-ZIP	JUNO BCH FL	2.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
TITLE	TD	3.1 TITLE	TD	☐ Change ☐ Addition
NAME	YOUNG, WILLIAM	3.2 NAME	YOUNG, WILLIAM E.	
STREET ADDRESS	102E SEA OATS DR.	3.3 STREET ADDRESS	102E SEA OATS DRIVE	
CITY-ST-ZIP	JUNO BCH. FL	3.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
TITLE	VD	4.1 TITLE	VD	☒ Change ☐ Addition
NAME	JONES, SANDY	4.2 NAME	RADEMACHER, STEVEN	
STREET ADDRESS	202E SEA OATS DR	4.3 STREET ADDRESS	205B SEA OATS DRIVE	
CITY-ST-ZIP	JUNO BCH FL	4.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
TITLE	ATD	5.1 TITLE		☐ Change ☐ Addition
NAME	JUDD, CYNTHIA	5.2 NAME		
STREET ADDRESS	101D SEA OATS DR	5.3 STREET ADDRESS		
CITY-ST-ZIP	JUNO BCH FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	FINKLING, MARVIN	6.2 NAME		
STREET ADDRESS	202F SEA OATS DR	6.3 STREET ADDRESS		
CITY-ST-ZIP	JUNO BCH FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William E. Young — William E. Young — 4/24/95 — (407) 622-2648
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0011220