

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


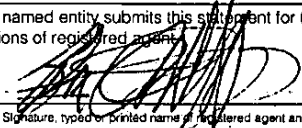
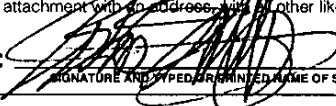
FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90032 039 ****61.25

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01132005 Chg-NP CR2E037 (10/03)

DOCUMENT # N03000005279			
1. Entity Name SEA WALK OWNERS ASSOCIATION, INC.			
Principal Place of Business 311 CENTRE STREET FERNANDINA BEACH, FL 32034		Mailing Address 311 CENTRE STREET FERNANDINA BEACH, FL 32034	
2. Principal Place of Business 95035 Seawalk Court		3. Mailing Address 95035 Seawalk Court	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Fernandina Beach, FL		City & State Fernandina Beach, FL	
Zip 32034	Country USA	Zip 32034	Country USA
4. FEI Number 58-77367 90-0211447		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JASINSKY, DENNIS 311 CENTRE STREET FERNANDINA BEACH, FL 32034		7. Name and Address of New Registered Agent Name John Williams Street Address (P.O. Box Number is Not Acceptable) 95035 Seawalk Court City Fernandina Beach FL Zip Code 32034	
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 		JOHN WILLIAMS - PRESIDENT 2-15-05	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JASINSKY, DENNIS 311 CENTRE STREET FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P John Williams 95035 Seawalk Court Fernandina Beach, FL 32034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV JASINSKY, BRUCE 311 CENTRE STREET FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Peter Petro 95047 Seawalk Court Fernandina Beach, FL 32034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TREVETT, HARRY R 1325 ATLANTIC AVE FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SP Susan Gibson 95011 Seawalk Court Fernandina Beach, FL 32034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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
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
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 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, title or other like empowered.			
SIGNATURE: 		JOHN WILLIAMS - PRES. 2-15-05 9042618359	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	