

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 11, 2008 8:00 am**  
**Secretary of State**

04-11-2008 90030 012 \*\*\*\*61.25

**DOCUMENT # N03000007910**

1. Entity Name  
**CONCERNED CITIZENS OF SOUTH BEACH  
HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**116 SOUTH BEACH DRIVE  
ST AUGUSTINE, FL 32084**

Mailing Address  
**116 SOUTH BEACH DRIVE  
ST AUGUSTINE, FL 32084**

**40064615**



03172008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>26-0070545</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**\*6. Name and Address of Current Registered Agent**

**DAVIES, MARY A  
116 SOUTH BEACH DRIVE  
ST AUGUSTINE, FL 32084**

**DO NOT WRITE  
IN THIS SPACE**

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**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DP  
DAVIES, MARY A  
116 S BEACH DR  
ST AUGUSTINE, FL 32084**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DST  
HOLLAND, LARRY  
104 S BEACH DR  
ST AUGUSTINE, FL 32084**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

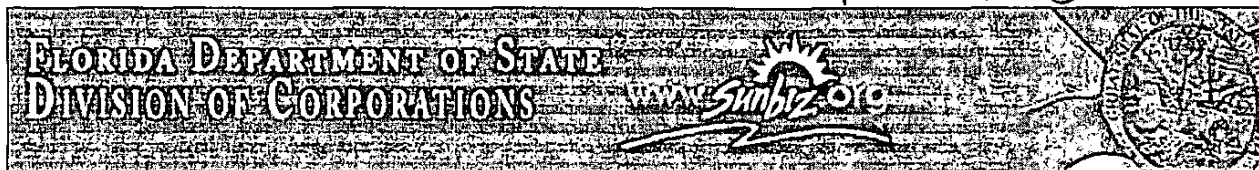
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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## 2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

\*\* The document number, business name and file date cannot be changed on the report. \*\*

**Document Number** N03000007910

**Business Entity Name** CONCERNED CITIZENS OF SOUTH BEACH HOMEOWNERS ASSOCIATION, INC.

**Original File Date** 09/12/2003

**FEI Number** 26-0070545

**Principal Address** 116 SOUTH BEACH DRIVE  
ST AUGUSTINE, FL 32084

**Mailing Address** 116 SOUTH BEACH DRIVE  
ST AUGUSTINE, FL 32084

**Registered Agent** MARY A DAVIES  
116 SOUTH BEACH DRIVE  
ST AUGUSTINE, FL 32084

### Officer/Director Name And Address

DP  
MARY A DAVIES  
116 S BEACH DR  
ST AUGUSTINE, FL 32084

DST  
LARRY HOLLAND  
104 S BEACH DR  
ST AUGUSTINE, FL 32084

If all of the above  
information is  
correct and you do  
not wish to make  
any changes,

If you need to  
make changes to  
the above  
information, please  
select:

ATTACHMENT  
40064615  
#N03000007910

please select:

☒ No Changes

☐ Make Changes

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