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

## May 02, 2006 8:00 am Secretary of State DOCUMENT # N03714 1. Entity Name 05-02-2006 90215 015 \*\*\*\*61.25 SEA OAKS TENNIS VILLAS CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963-9040 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963-9040 2. Principal Place of Business 3. Mailing Address 8811 8811 Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) 4. FEI Number Applied For ero B vero Ba 59-2688907 Not Applicable \$8.75 Additional 296. 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAWSON, PAMELA Street Address (P.O. Box Number is Not Acceptable) 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 Zip Code 8. The above named entity submit 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 obligation s of registered agent. SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VICE PRESIDENT Delete TITLE KINGSTON, BERLEW NAME NAME ssil Hwy Aif 1235 WINDING OAKS CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP Vero Beach, FL 32963 TITLE ☐ Delete TITLE ☐ Addition GRIGSBY, SUSAN NAME NAME 8811 HUYAIA 1235 WINDING OAKS CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP TITLE ☐ Delete TITLE -Change Addition NAME~ SHERMAN, ROBERT NAME STREET ADDRESS STREET ADDRESS 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-7IP TREASURGE TITLE ☐ Delete TITLE Change ■ Addition NAME CRONENWETT, ROBERT 8811 HWY AIA STREET ADDRESS 1235 WINDING OAKS CIR STREET ADDRESS CITY-\$1-ZIP CITY-ST-ZIP VERO BEACH FL 32963 ☐ Defete TITLE E Change ☐ Addition TITLE MATTHEWS, WILLIAM NAME NAME 8811 Itwy A1A 1235 WINDING OAKS CIR STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-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 supplier entail 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 of trustee employed to execute this eport as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment water and dessecute this eport as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment water and dessecute this eport as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment water and dessecute this eport as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment water and dessecute this eport as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment water and the security of the chapter of the

all other like eppowered

WILLIAM P. MATHEWS 3/9/06 172-231-2154

if changed, or on an attachment was applied

SIGNATURE:

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