2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006 8:00 am
Secretary of State
03-01-2006 90017 001 ****61.25

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1. Entity Name
NORTH BEACHES COSTA BRAVA CONDOMINIUM OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1008 OCEANWOOD DRIVE NORTH NEPTUNE BEACH, FL 32266	P O BOX 50218 JACKSONVILLE BEACH, FL 32240

02242006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 17-4936000 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAM, SHARON
1008 OCEANWOOD DRIVE NORTH
NEPTUNE BEACH, FL 32266

7. Name and Address of New Registered Agent

Name Sharon Fisher
Street Address (P.O. Box Number is Not Acceptable)
1008 Oceanwood Drive North
City Neptune Beach FL Zip Code 32266

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 Sharon Fisher 2/24/06
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, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ONDREJICKA, JOHN 4595 LEXINGTON AVE SUITE 100 JACKSONVILLE, FL 32210	☑ Delete	P Adrian Greenhut 3141 Issen Ln. Jacksonville, FL 32257	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEARDSLEY, DALE A 4595 LEXINGTON AVE SUITE 100 JACKSONVILLE, FL 32210	☑ Delete	V Damien Blumstein 114 18th Ave. N., Unit H Jacksonville Beach, FL 32250	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORRELL, ALVARO 4595 LEXINGTON AVE SUITE 100 JACKSONVILLE, FL 32210	☑ Delete	T Jess Barrett 114 18th Ave. N, Unit F Jacksonville Beach, FL 32250	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S John Shuler 114 18th Ave N, Unit D Jacksonville Beach, FL 32250	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: Sharon Fisher CAM 2/24/06 904-242-2655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #