

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2006 8:00 am
Secretary of State

07-25-2006 90027 023 ****61.25

DOCUMENT # N04704

1. Entity Name
**OCEAN MANOR AT PONTE VEDRA CONDOMINIUM
ASSOCIATION II, INC.**



Principal Place of Business
**ASSOCIATION MGMT OF PONTE VEDRA, INC.
3103 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA, FL 32082**

Mailing Address
**ASSOCIATION MGMT OF PONTE VEDRA, INC.
3103 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA, FL 32082**

50023078



07102006 Chg-NP CR2E037 (4/06)

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
59-2647243

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CONNOLLY, C.P.S.W
ASSOCIATION MGMT. OF PONTE VEDRA, INC.
3103 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

C.P. Connolly *C.P. Connolly*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7-10-06

**Filing Fee is \$61.25
Due by September 6, 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

TITLE PD ☐ Delete
NAME GILLIGAN, MICHAEL
STREET ADDRESS 693 PONTE VEDRA BLVD #203
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE VPD ☐ Delete
NAME SALISBURY, HARRY JR
STREET ADDRESS PO BOX 1661
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE D ☒ Delete

NAME HORNSBY, TOM
STREET ADDRESS 693 PONTE VEDRA BLVD #206
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition

NAME SWIFT, MARY LOU
STREET ADDRESS 0005 GREEN ISLAND DR
CITY-ST-ZIP COLUMBUS GA 31904

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/06 (904) 285-9894
Date Daytime Phone #