

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000007530

FILED
Apr 04, 2007
Secretary of State

Entity Name: OCEAN'S SIX OF ST. AUGUSTINE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14 12TH STREET
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

16 12TH STREET
ST. AUGUSTINE, FL 32080

Current Mailing Address:

14 12TH STREET
ST. AUGUSTINE, FL 32080

New Mailing Address:

16 12TH STREET
UNIT A
ST. AUGUSTINE, FL 32080

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JONES, KATHERINE G
780 NORTH PONCE DE LEON BOULEVARD
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

NOCK III, JOHN D
950 STATE ROAD 206 EAST
ST. AUGUSTINE, FL 32086 US

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.

SIGNATURE: JOHN D. NOCK III

04/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NOCK, JOHN D III
Address: 950 STATE ROAD 206 EAST
City-St-Zip: ST. AUGUSTINE, FL 320867983

Title: STD () Delete
Name: CAMPBELL, ROY
Address: 65 LEWIS BOULEVARD
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D () Delete
Name: NOCK, KATHRYN T
Address: 950 STATE ROAD 206 EAST
City-St-Zip: ST. AUGUSTINE, FL 320867983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NOCK, JOHN D III
Address: 950 STATE ROAD 206 EAST
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: D (X) Change () Addition
Name: CAMPBELL, ROY
Address: 65 LEWIS BOULEVARD
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: STD (X) Change () Addition
Name: HILLIARD, KAREN M
Address: 16 12TH STREET UNIT A
City-St-Zip: ST. AUGUSTINE, FL 32080 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN M. HILLIARD

STD

04/04/2007

Electronic Signature of Signing Officer or Director

Date