
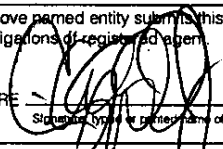
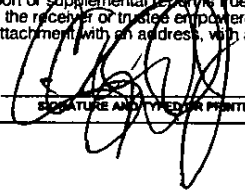


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90100 031 ****61.25

DOCUMENT # N23556 1. Entity Name OTTER RUN HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 220 OTTER RUN DR FERNANDINA BEACH, FL 32034 US				Mailing Address P.O. BOX 15282 FERNANDINA BEACH, FL 32034 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 15282 Suite, Apt. #, etc.			
City & State 		City & State Fernandina Bch, FL		4. FEI Number 59-3311231	
Zip 		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPEDALIERE, CARMINE 4281 HICKORY PLACE FERNANDINA BCH, FL 32034				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  <small>Signature of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE 2-28-06	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	SD TRAHAN, TODD 1888 PALMETTO DRIVE FERNANDINA BEACH, FL 32034	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MCINTYRE, ROBERT 220 OTTER RUN DR. FERNANDINA BEACH, FL 32034	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURRY, GREG 397 OTTER RUN DR FERNANDINA BEACH, FL 32034	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ARMBRUSTER, JOHN 4296 MAPLE COURT FERNANDINA BCH, FL 32034	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPEDALIERE, CARMINE 4281 HICKORY PLACE FERNANDINA BEACH, FL 32034	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary DARLA JOHNSON 846 PALMETTO TRAIL FERN. BCH, FL 32034	<input type="checkbox"/> Delete			
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 reports 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:  Carmine Spedaliere 2-28-06 904-261-4285 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					