

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2007 8:00 am**  
**Secretary of State**

04-11-2007 90040 024 \*\*\*\*61.25

**DOCUMENT # N26735**

1. Entity Name  
**NEPTUNE BY THE SEA HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**625 MCCOLLUM CIRCLE  
NEPTUNE BEACH, FL 32266 US**

Mailing Address  
**625 MCCOLLUM CIRCLE  
NEPTUNE BEACH, FL 32266 US**

**40057227**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04072007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**59-2893769**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PITTMAN, CAROL  
625 MCCOLLUM CIRCLE  
NEPTUNE BEACH, FL 32266**

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

*Carol Pittman* TD

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

(NOTE: Registered Agent signature required when reinstating)

4/7/07

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

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 PD ☐ Delete  
NAME MAZZOLA, ANTHONY  
STREET ADDRESS 929 BIRCH COURT  
CITY-ST-ZIP NEPTUNE BEACH, FL 32266

TITLE VD ☒ Change ☐ Addition  
NAME MAZZOLA, ANTHONY  
STREET ADDRESS 929 BIRCH CT  
CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE SD ☐ Delete  
NAME CLARKE, PATRICIA  
STREET ADDRESS 536 MCCOLLUM CIRCLE  
CITY-ST-ZIP NEPTUNE BEACH, FL 32266

TITLE PD ☐ Change ☒ Addition  
NAME ROBINSON, JASON  
STREET ADDRESS 534 MCCOLLUM CIR  
CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE TD ☐ Delete  
NAME PITTMAN, CAROL  
STREET ADDRESS 625 MCCOLLUM CIRCLE  
CITY-ST-ZIP NEPTUNE BEACH, FL 32266

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

TITLE VD ☒ Delete  
NAME HENEHAN, TODD  
STREET ADDRESS 619 FIFTH ST.  
CITY-ST-ZIP NEPTUNE BEACH, FL 32266

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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:

*Carol Pittman*

CAROL PITTMAN

4/7/07

904 246-6683

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #