2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 27, 2005 8:00 am Secretary of State DOCUMENT # N27303 1. Entity Name 04-27-2005 90329 046 ****61.25 SEA OAKS LAKESIDE VILLAS "A" CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 14000955 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 65-0107064 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DAWSON, PAMELA Street Address (P.O. Box Number is Not Acceptable) 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963 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 1) Awson Amela SIGNATURE. Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD VICE PRESIDENT Delete Change ☐ Addition HILTON, RAYMOND NAME 1235 WINDING OAKS CIRCLE STREET ADDRESS STREET ADDRESS VERO BEACH FL CITY-ST-ZIP CITY-ST-7IP VD SECRETARY /TREASURER Change TITLE ☐ Delete TITLE Addition MILLER, RICHARD NAME NAME 1235 WINDING OAKS CIRCLE STREET ADDRESS STREET ADDRESS VERO BEACH FL CITY-ST-ZIP CITY-ST-ZIP CTD PRESIDENT ☐ Defete TILLE Change Change ■ Addition EVERETT, DONALD NAME 1235 WINDING OAKS CIR STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THILE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TATLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

March 30, 2005 231-2154