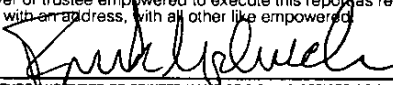


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90074 036 ****61.25

DOCUMENT # N31864 1. Entity Name OAK BLUFFS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business % FRANK D. UPCHURCH, III 780 N. PONCE DE LEON BLVD ST. AUGUSTINE, FL 32084			Mailing Address % FRANK D. UPCHURCH, III P. O. DRAWER 3007 ST. AUGUSTINE, FL 32085 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2947005	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UPCHURCH, FRANK D., III 780 N. PONCE DE LEON BLVD ST AUGUSTINE, FL 32084				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ (NOTE: Registered Agent signature required when reconstituting) _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 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				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIMARE, FRANK 3545 U.S. 1 SOUTH ST. AUGUSTINE, FL	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DiMare, W. Frank 3545 Highway U.S. 1 South St. Augustine, FL 32086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAULES, GEORGE 4184 OAKBLUFF DRIVE SAINT AUGUSTINE, FL 32086	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paules, George 4184 Creekbluff Drive St. Augustine, FL 32086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD UPCHURCH, FRANK D., III 4148 CREEKBLUFF DR SAINT AUGUSTINE, FL 32086	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Upchurch, Frank D., III 4148 Creekbluff Drive St. Augustine, FL 32086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCARTY, A. OBIE 4112 CREEKBLUFF DR SAINT AUGUSTINE, FL 32086	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD McCarty, A. Obie 4112 Creekbluff Drive St. Augustine, FL 32086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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:  4/21/06 (904) 829-9066					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Frank D. Upchurch III, Treasurer/Director					