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

Apr 27, 2005 8:00 am Secretary of State DOCUMENT # N38090 1. Entity Name 04-27-2005 90316 041 ****61.25 SEA OAKS TENNIS VILLAS "A" CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1235 WINDING OAKS CIRCLE 1235 WINDING OAKS CIRCLE 14000310 VERO BCH. FL 32963 VERO BCH. FL 32963 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 65-0202343 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAWSON, PAMELA Street Address (P.O. Box Number is Not Acceptable) 1235 WINDING OAKS CIRCLE VERO BEACH FL-32963 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of regis ered ag Amela DAWSON SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VD Change **Ed**dition TITLE ☐ Delete TITLE treasurer WATERBURY, STEVE NAME NAME 1235 WINDING OAKS CIR STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP SD TITLE ☐ Delete TITLE Change ☐ Addition SHAW, JOE NAME 1235 WINDING OAKS CIR STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE PRESIDEIVT ☐ Change Addition WOOD, SPENCER NAME PRESTON LORDAN 1235 WINDING DAYS CIR. VERO BEACH, FL 32963 1235 WINDING OAKS CIRCLE STREET ADDRESS STREET ADDRESS VERO BCH. FL CITY-ST-ZIP CITY-ST-7IP DIRRATING Change ☐ Addition TOTALE ☐ Delete TITLE OANCEA, NICHOLAS NAME NAME 1235 WINDING OKAS CIRCLE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP VICE PRESIDENT TITLE Delete TITLE ☐ Channe Addition DEMBER, ALICE SIANDRA NOVIK NAME NAME 1235 WINDING OKAS CIRCLE 1235 WINDING DAYS UR. STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP VERO BORCH, FL 32963 TITLE ☐ Change ☐ Addition TITLE ☐ Delete 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 changed, or on an attachment with an address, with all other like empowered.

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SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Daytime Phone #