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Apr 30 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N39531** (1)

1. Corporation Name

**OCEAN OAKS HOMEOWNERS ASSOCIATION OF ST. AUGUSTINE BEACH, INC.**

Principal Place of Business

Mailing Address

29 SUNFISH DR.  
ST. AUGUSTINE BEACH FL 32084  
US

29 SUNFISH DR.  
ST. AUGUSTINE BEACH FL 32084  
US

3. Date Incorporated or Qualified

08/13/1990

4. FEI Number

59-2811335

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 18 SUNFISH DRIVE

26 18 SUNFISH DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State 32084  
23 ST. AUGUSTINE BEACH, FL

27 City & State ST. AUGUSTINE BEACH, FLORIDA

24 Zip 32084 25 Country U.S.A.

28 Zip 32084 29 Country U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAHLER, ROBERT R  
29 SUNFISH DR.  
ST. AUGUSTINE BEACH FL 32084

81 Name LESTER JACOBSON

82 Street Address (P.O. Box Number is Not Acceptable)  
18 SUNFISH DRIVE

83

84 City ST. AUGUSTINE BEACH, FL 85 Zip Code 32084

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Lester Jacobson - Pres.*

4/22/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T  
NAME KAHLER, EMILY B  
STREET ADDRESS 29 SUNFISH DR.  
CITY-ST-ZIP ST. AUGUSTINE BCH. FL 32084 ☒ DELETE

V  
1.1 TITLE TYNER BATEMAN ☐ Change ☒ Addition  
1.2 NAME 8 SUNFISH DRIVE  
1.3 STREET ADDRESS ST. AUGUSTINE BEACH, FL 32084  
1.4 CITY-ST-ZIP

V  
NAME JACOBSON, LESTER  
STREET ADDRESS 18 SUNFISH DRIVE  
CITY-ST-ZIP ST. AUGUSTINE BCH. FL ☒ DELETE

P  
2.1 TITLE LESTER JACOBSON ☐ Change ☐ Addition  
2.2 NAME 18 SUNFISH DRIVE  
2.3 STREET ADDRESS ST. AUGUSTINE BEACH, FL 32084  
2.4 CITY-ST-ZIP

S  
NAME POLAND, RICHARD  
STREET ADDRESS 48 OCEAN COURT  
CITY-ST-ZIP ST. AUGUSTINE BCH FL ☒ DELETE

S  
3.1 TITLE YVAN KELLY ☐ Change ☐ Addition  
3.2 NAME 7 SUNFISH DRIVE  
3.3 STREET ADDRESS ST. AUGUSTINE BEACH, FL 32084  
3.4 CITY-ST-ZIP

P  
NAME KAHLER, ROBERT R  
STREET ADDRESS 29 SUNFISH DR  
CITY-ST-ZIP ST. AUGUSTINE BCH FL 32084 ☒ DELETE

T  
4.1 TITLE ROBERT R. KAHLER ☐ Change ☐ Addition  
4.2 NAME 29 SUNFISH DRIVE  
4.3 STREET ADDRESS ST. AUGUSTINE BEACH, FL 32084  
4.4 CITY-ST-ZIP

D  
NAME UPSHALL, CECIL  
STREET ADDRESS 50 OCEAN CT  
CITY-ST-ZIP ST. AUGUSTINE BCH FL ☐ DELETE

D  
5.1 TITLE MARY BETH HUTCHINSON ☐ Change ☒ Addition  
5.2 NAME 9 BEACH STREET  
5.3 STREET ADDRESS ST. AUGUSTINE BEACH, FL 32084  
5.4 CITY-ST-ZIP

D  
NAME CONNOR, JAMES  
STREET ADDRESS 12 SUNFISH DR  
CITY-ST-ZIP ST AUGUSTINE BCH FL ☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lester Jacobson*, Lester Jacobson, 4/22/98 904-471-8358

CR2E037 (10/97)

# OCEAN OAKS HOMEOWNER'S ASSOCIATION

SAINT AUGUSTINE BEACH, FLORIDA

18 SUNFISH DRIVE

TEL. 904-471-8358

FEI #59-2811335

April 22, 1998

TO: Division of Corporations  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Document #39531  
Supplementary Data.

## Additional Director Listings for 1998:

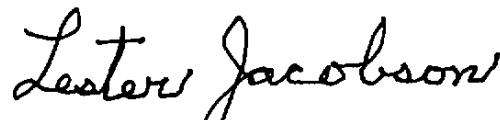
- D- Vincent Micco, 41 Ocean Court, St. Augustine Beach, FL 32084
- D- Audrey Jacobson, 18 Sunfish Drive, St. Augustine Beach, FL 32084
- D- Vreni Rusterholz-Leiva, 51 Ocean Court, St. Augustine Beach, FL 32084

All three of these Directors are holdovers from 1997.

The balance of our Officers/Directors are listed on the primary 1998 Report.

This fully identifies our listing of four (4) Officers and six (6) Directors for your 1998 Nonprofit Corporation Report.

Very truly yours,

A handwritten signature in cursive script that reads "Lester Jacobson".

Lester Jacobson-President