

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90160 021 ****61.25

DOCUMENT # N96000004769			
1. Entity Name ST. GEORGE'S ISLAND AT OAK HARBOR HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 4340 US HIGHWAY # 1 VERO BEACH, FL 32967 US		Mailing Address 4340 US HIGHWAY # 1 VERO BEACH, FL 32967 US	
2. Principal Place of Business 4380 U.S. Hwy #1 Suite, Apt. #, etc.		3. Mailing Address 4380 U.S. Hwy #1 Suite, Apt. #, etc.	
City & State VERO BEACH FL		City & State VERO BEACH FL	
Zip 32967 Country		Zip 32967 Country	
4. FEI Number 65-0711853		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent SPEECHLY, CLIFFORD S JR 4340 US HIGHWAY # 1 VERO BEACH, FL 32967		7. Name and Address of New Registered Agent Name SPEECHLY CLIFFORD S. JR. Street Address (P.O. Box Number is Not Acceptable) 4380 U.S. Hwy #1 City VERO BEACH FL Zip Code 32967	
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 CLIFFORD S. SPEECHLY JR, MGR 4/2/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <input checked="" type="checkbox"/> Delete BRUK, DOUGLAS 4340 US HIGHWAY # 1 VERO BEACH, FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input type="checkbox"/> Delete NORTH, ANNABEL 4340 US HIGHWAY # 1 VERO BEACH, FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input type="checkbox"/> Delete GROHOL, JENNIFER 4340 US HIGHWAY # 1 VERO BEACH, FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M <input type="checkbox"/> Delete SPEECHLY, CLIFFORD S JR 4340 US HIGHWAY # 1 VERO BEACH, FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition REESE, ALAN 4380 U.S. Hwy #1 VERO BEACH FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NORTH, ANNABEL 4380 U.S. Hwy #1 VERO BEACH, FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition GROHOL, JENNIFER 4380 U.S. Hwy #1 VERO BEACH FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SPEECHLY, CLIFFORD S. JR. 4380 U.S. Hwy #1 VERO BEACH FL 32967		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: CLIFFORD S. SPEECHLY JR. 4/2/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			