## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9800000078

FILED Apr 26, 2006 Secretary of State

Entity Name: SOUTH PABLO BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

388 SOUTH 1ST STREET 200 EXECUTIVE WAY

JACKSONVILLE, FL 32250 SUITE 206

PONTE VEDRA BCH, FL 32082

**Current Mailing Address:** New Mailing Address:

200 EXECUTIVE WAY 388 SOUTH 1ST STREET

JACKSONVILLE, FL 32250 SUITE 206

PONTE VEDRA BCH, FL 32082

FEI Number: 59-3487226 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STAMATOGIANNAKIS, ALIXE MRS ELDER, MARTHA C MRS 388 SOUTH 1ST STREET 200 EXECUTIVE WAY 2180 W SR 434 STE 5000 SUITE 206

JACKSONVILLE, FL 32250 US PONTE VEDRA BCH, FL 32082 US

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.

SIGNATURE: MARTHA ELDER 04/26/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

STAMATOGIANNAKIS, ALIXE SPAULDING, GRETTA Name: Name: 384 SOUTH 1ST ST Address: 388 SOUTH 1ST ST Address: City-St-Zip: JACKSONVILLE, FL 32250 City-St-Zip: JACKSONVILLE, FL 32250

(X) Change ( ) Addition Title: Title: SD ( ) Delete

BATTAGLIA, LORY NICOLE Name: HAWKINS, LINDA Name: Address: 388 1ST. STREET SOUTH Address: 588 SEABROOK COVE RD

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE, FL 32211

Title: VD. () Delete Title: (X) Change ( ) Addition

YALES, BONNIE SHERIDAN, MICHAEL Name: Name: 1317 MARSH HARBOR DR Address: 384 1ST. STREET SOUTH Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSOSNVILLE, FL 32225

Title: вм ( ) Delete Title: PD (X) Change ( ) Addition

SOLIS, GREG Name: SOLIS, GREG Name:

382 SOUTH 1ST STREET Address: 382 SOUTH 1ST STREET Address: City-St-Zip: JACKSONVILLE, FL 32250 City-St-Zip: JACKSONVILLE, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREG SOLIS Ρ 04/26/2006