2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 27, 2007 8:00 am Secretary of State DOCUMENT # N98000002024 04-27-2007 90233 025 ****61.25 1. Entity Name SEA OAKS RIVER HOMES V HOMEOWNERS ASSOCIATION, INC. Mailing Address Principal Place of Business 60043426 8811 A1A 8811 A1A VERO BEACH, FL 32963 VERO BEACH, FL 32963 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04132007 Chg-NP CR2E037 (12/06) 4. FEI Number 65-0843962 City & State City & State Applied For Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DAWSON, PAMELA Street Address (P.O. Box Number is Not Acceptable) 8811 A1A VERO BEACH, FL 32963 Zip Code FL 8. The above named entity submits this state of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, lyped or nted name of registered agent and title if applicable 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. DP ☐ Change Addition Delete TITLE TITLE Rick Bellows DUCAYET, KIRBY NAME NAME 8811 HWY AIA STREET ADDRESS 8811 A1A STREET ADDRESS CITY-ST-ZIP Vero Beach, FL 32963 VERO BEACH, FL 32963 CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE Gene wheeler NAME BONNET, ERIC NAME 8811 HWY. AIA STREET ADDRESS 1235 WINDING OAK CIR STREET ADDRESS Vero Beach, FL 32963 VERO BEACH, FL 32963 CITY-ST-ZIP CITY-ST-ZIP **X** Delete TITLE Addition TITLE Richard Bottelli WEISS, DALE NAME NAME 1235 WINDING OAKS CIR. STREET ADDRESS 8811 Hwy, AIA STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32963 ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.

Jellows

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

4-23-07