

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000004597

**Entity Name:** SPANISH OAKS HOMEOWNERS' ASSOCIATION OF ST. AUGUSTINE, INC.**Current Principal Place of Business:**105 SPANISH OAKS LANE  
SAINT AUGUSTINE, FL 32080**Current Mailing Address:**PO BOX 840164  
ST. AUGUSTINE, FL 32080-0164 US**FEI Number:** 65-1123826**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHAMBERS, BRUCE  
105 SPANISH OAKS LANE  
SAINT AUGUSTINE, FL 32080 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:** BRUCE CHAMBERS

03/09/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name SARRIS, VICTOR  
Address 124 SPANISH OAKS LANE  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title DIRECTOR, VICE PRESIDENT  
Name VONDRA, JUDY  
Address 116 SPANISH OAKS LANE  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title DIRECTOR, TREASURER  
Name CHAMBERS, BRUCE  
Address 105 SPANISH OAKS LN  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title DIRECTOR  
Name HAZEL, JOHN  
Address 125 SPANISH OAKS LANE  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title DIRECTOR  
Name COUSART, CHRISTINE  
Address 108 SPANISH OAKS LANE  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title SECRETARY  
Name CHAMBERS, WANDA  
Address 105 SPANISH OAKS LANE  
City-State-Zip: SAINT AUGUSTINE FL 32080

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRUCE CHAMBERSREGISTERED AGENT,  
DIRECTOR, TREASURER

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date