**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 24, 2019**
**Secretary of State**
**5765140292CC**

DOCUMENT# N02338

**Entity Name:** SEA OATS OF JUNO BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

CAMPBELL PROPERTY MANAGEMENT
401 MAPLEWOOD DR STE#23
JUPITER, FL 33458-5850

**Current Mailing Address:**

CAMPBELL PROPERTY MANAGEMENT
401 MAPLEWOOD DR STE#23
JUPITER, FL 33458-5850 US

**FEI Number: 59-2483919**

**Certificate of Status Desired:** No

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

COPPLE SACHS COPPLE
11780 US HWY ONE, STE 105
PB GARDENS, FL 33408 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: RYAN COPPLE 04/24/2019

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | | | |
|---|---|---|---|
| Title | VP | Title | DIRECTOR |
| Name | JAKUBOSKI, JOSEPH | Name | BLOEMERS, ROGER |
| Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 | Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 |
| City-State-Zip: | JUPITER FL 33458-5850 | City-State-Zip: | JUPITER FL 33458-5850 |
| Title | SECRETARY | Title | PRESIDENT |
| Name | FINDLING, MARVIN S | Name | BISCEGLIA, BARBARA |
| Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 | Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 |
| City-State-Zip: | JUPITER FL 33458-5850 | City-State-Zip: | JUPITER FL 33458-5850 |
| Title | TREASURER | Title | DIRECTOR |
| Name | DILEO, DANIEL T | Name | STREMPEK, ROBERT |
| Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 | Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 |
| City-State-Zip: | JUPITER FL 33458-5850 | City-State-Zip: | JUPITER FL 33458-5850 |
| Title | DIRECTOR | | |
| Name | DEMASTRY, LINDA | | |
| Address | CAMPBELL PROPERTY MANAGEMENT<br>401 MAPLEWOOD DR STE#23 | | |
| City-State-Zip: | JUPITER FL 33458-5850 | | |

*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: BARBARA BISCEGLIA PRESIDENT 04/24/2019

Electronic Signature of Signing Officer/Director Detail Date