2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 710889

Entity Name: OCEAN HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

1200 US HWY ONE
SUITE E
N PALM BCH, FL 33408

New Principal Place of Business:

Current Mailing Address:

1200 US HWY ONE
SUITE E
N PALM BCH, FL 33408

New Mailing Address:

FEI Number: 59-1319818 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OPC MANAGEMENT, INC
1200 US HWY ONE
SUITE E
N PALM BCH., FL 33408 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LACY, ANDRE
Address: 11416 TURTLE BEACH ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: STD ( ) Delete
Name: VAN BOVEN, CAROLYN
Address: 11270 TURTLE BEACH RD
City-St-Zip: N PALM BECH, FL

Title: PD ( ) Delete
Name: ROENISCH, DAVIS
Address: 11416 TURTLE BEACH RD.
City-St-Zip: NORTH PALM BEACH, FL

Title: D ( ) Delete
Name: CHACE, MALCOM G
Address: 11354 TURTLE BCH RD
City-St-Zip: NO. PALM BEACH, FL 33408

Title: D ( ) Delete
Name: COTE, PIERRE
Address: 11310 TURTLE BCH RD
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: ROBERT, MILANESE
Address: 11354 TURTLE BCH RD
City-St-Zip: NO. PALM BEACH, FL 33408

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CAROLYN VAN BOVEN S 05/01/2006

Electronic Signature of Signing Officer or Director — Date