


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 712243 1. Entity Name OCEANSIDE APARTMENTS, INC.			
Principal Place of Business 3200 NORTHEAST 7TH COURT POMPANO BEACH FL 33062		Mailing Address 3200 NORTHEAST 7TH COURT POMPANO BEACH FL 33062	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-1217731		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KAYE & ROGER PA 1550 W CYPRESS CREEK RD STE 207 FT. LAUDERDALE FL 33309		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D PETERSON, ROBERT J	<input type="checkbox"/> Delete	
STREET ADDRESS	3200 NE 7TH CT 108B		
CITY-ST-ZIP	POMPANO BEACH FL 33062		
TITLE	D CICONTE, JOSEPH	<input type="checkbox"/> Delete	
STREET ADDRESS	3200 NE 7TH COURT, #101C		
CITY-ST-ZIP	POMPANO BEACH FL		
TITLE	D DOUCELTE, GERALD	<input type="checkbox"/> Delete	
STREET ADDRESS	3200 NE 7TH CT 301 A		
CITY-ST-ZIP	POMPANO BEACH FL 33062		
TITLE	T MCGINNIS, JOHN	<input type="checkbox"/> Delete	
STREET ADDRESS	3200 NE 7TH ST #204B		
CITY-ST-ZIP	POMPANO BEACH FL		
TITLE	P DANIEL, DIONIS	<input type="checkbox"/> Delete	
STREET ADDRESS	3200 NE 7TH CT #107B		
CITY-ST-ZIP	POMPANO BEACH FL		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			



1st MOORE CR2E037 (10/05)

4. FEI Number **59-1217731**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

SIGNATURE _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
 Trust Fund Contribution **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D PETERSON, ROBERT J	<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3200 NE 7TH CT 108B				
CITY-ST-ZIP	POMPANO BEACH FL 33062				
TITLE	D CICONTE, JOSEPH	<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3200 NE 7TH COURT, #101C				
CITY-ST-ZIP	POMPANO BEACH FL				
TITLE	D DOUCELTE, GERALD	<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3200 NE 7TH CT 301 A				
CITY-ST-ZIP	POMPANO BEACH FL 33062				
TITLE	T MCGINNIS, JOHN	<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3200 NE 7TH ST #204B				
CITY-ST-ZIP	POMPANO BEACH FL				
TITLE	P DANIEL, DIONIS	<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3200 NE 7TH CT #107B				
CITY-ST-ZIP	POMPANO BEACH FL				
TITLE		<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME					
STREET ADDRESS					
CITY-ST-ZIP					

U00000418462
02/14/06-80008-018 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.