## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # 726226



## **FILED** Apr 16, 2003 8:00 am Secretary of State

OCEAN I	OWERS II OF VERO BEACH,	INC.				16-2003 90193	020 ***** 0	1.23	
Principal Place of Business 2800-2824 CARDINAL DR VERO BCH FL 32963 US 2. Principal Place of Business		Mailing Address PO BOX 3905 VERO BCH FL 32964 US  3. Mailing Address			I HARDI KARIA MAKA AN	18 HB18 11818 8171 81816 81	<b>a</b> ni <b>s</b> h <b>a</b> ni <b>a</b> ni ani	B)  818   188	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHEC	CK HERE IF MAKIN	G CHANGES	<b>;</b>	
City & State		City & State			4. FEI Number 59-1582260		<u> </u>	Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status	Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Current I	legistered Agent			7. Name and Address	of New Registered	Agent		
1000 14	AMV I		Name						
	RDINAL DR.		Street A	Address (F	P.O. Box Number is Not A	cceptable)			
VERO BC	H FL 32963	e la les de la company				<del>~</del>		:	
			City			Fl	Zip Cod	de	
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office o	r registere	ed agent, or both, in the S	State of Florida. I am	n familiar with,	, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	: Registered Agent signal	ture required	when reinstating)	DATE			
			paign Financing ontribution.		\$5.00 May Be Added to Fees  Make Check Payable to Florida Department of State				
10.	OFFICERS AND DIR	<del> </del>			ADDITIONS/CHANGES TO	O DEELCEDS AND D	IDEOTODO IN	1.10	
TITLE NAME	LCD	ECTORS	11.		ADDITIONS/CHANGES IT	O OI HOLMS AND D	IRECTORS II	V 10	
STREET ADDRESS CITY-ST-ZIP	LARD, WILLIAM 2822 CARDINAL DR VERO BEACH FL 32963	ECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	706	O, WILLIAMS	.Dr	Change	Addition	
STREET ADDRESS	LARD, WILLIAM 2822 CARDINAL DR VERO BEACH FL 32963 VD GODFREY, SOPHIA 2814 CARDINAL DR		TITLE NAME STREET ADDRESS	706		.Dr	7.		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	LARD, WILLIAM 2822 CARDINAL DR VERO BEACH FL 32963 VD GODFREY, SOPHIA 2814 CARDINAL DR VERO BCH FL 32963 T BALLARD, CLAIRE T 2808 CARDINAL DR	□ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	706	O, WILLIAMS	.Dr	Change	☐ Addition	
STREET ADDRESS CITY-SI-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	LARD, WILLIAM 2822 CARDINAL DR VERO BEACH FL 32963 VD GODFREY, SOPHIA 2814 CARDINAL DR VERO BCH FL 32963 T BALLARD, CLAIRE T	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	706	O, WILLIAMS	.Dr	Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	LARD, WILLIAM 2822 CARDINAL DR VERO BEACH FL 32963 VD GODFREY, SOPHIA 2814 CARDINAL DR VERO BCH FL 32963 T BALLARD, CLAIRE T 2808 CARDINAL DR VERO BCH FL 32963 D LORD, MARY L 2822 CARDINAL DR.	□ Delete  □ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	5 100 286 Ve	O, WILLIAMS	Dr 32943 NA	☐ Change ☐ Change ☐ Change	Addition  Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

**SIGNATURE** 

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