

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729876

FILED
Mar 24, 2008
Secretary of State

Entity Name: OCEANS THREE CONDOMINIUM ASSOCIATON, INC.

Current Principal Place of Business:

3043 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118

New Principal Place of Business:

Current Mailing Address:

3043 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118

New Mailing Address:

FEI Number: 59-1649524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARR, ANNE
3043 SOUTH ATLANTIC AVENUE #1404
DAYTONA BEACH SHORES, FL 32118 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: BUSHEY, JAMES
Address: 3043 S. ATLANTIC AVE. #406
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VP () Delete
Name: CARR, ANNE
Address: 3043 S. ATLANTIC AVE. #1404
City-St-Zip: DAYTONA BEACH, FL 32118

Title: S () Delete
Name: DUNBAR, CAROLE
Address: 3043 SOUTH ATLANTIC AVENUE #203
City-St-Zip: DAYTONA BEACH SHORES, FL 32118

Title: AST () Delete
Name: MILLER, STEVE
Address: 3043 S. ATLANTIC AVE., #304
City-St-Zip: DAYTONA BEACH, FL 32118

Title: T () Delete
Name: WYNN, LOWELL
Address: 3043 S. ATLANTIC AVE., #1103
City-St-Zip: DAYTONA BEACH, FL 32118

Title: P () Delete
Name: STEVENS, ROBERT
Address: 3043 S. ATLANTIC AVE. UNIT 303
City-St-Zip: DAYTONA BEACH SHORES, FL 32118

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT STEVENS

PRES

03/24/2008

Electronic Signature of Signing Officer or Director

_____ Date