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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

03-08-1999 90033 011 ****61.25

DOCUMENT # 732870

1. Corporation Name

OCEANA ASSOCIATION, INC.

Principal Place of Business

9920 S. OCEAN DR.
HUTCHINSON ISLAND
JENSEN BEACH FL 34957-2433

Mailing Address

9920 S. OCEAN DR.
HUTCHINSON ISLAND
JENSEN BEACH FL 34957-2433



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

05/28/1975

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-1799874

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip 25 Country

29 Zip 30 Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

WRIGHT, ELLEN
611 S FEDERAL HWY
STE C
STUART FL 34994

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD DELETE
NAME BARTELS, WILLIAM
STREET ADDRESS 9900 S OCEAN DRIV
CITY-ST-ZIP JENSEN BEACH FL

TITLE D DELETE
NAME HACK, FRANK
STREET ADDRESS 9940 S OCEAN DRIVE
CITY-ST-ZIP JENSEN BEACH FL

TITLE DT DELETE
NAME SMITH, ROY
STREET ADDRESS 9900 S OCEAN DRIVE
CITY-ST-ZIP JENSEN BCH, FL 00000

TITLE SD DELETE
NAME SLATTERY, THOMAS
STREET ADDRESS 9900 S OCEAN DR
CITY-ST-ZIP JENSEN BEACH, FL 00000

TITLE VPD DELETE
NAME DAVIS, LON
STREET ADDRESS 9940 S OCEAN DR
CITY-ST-ZIP JENSEN BEACH FL 34952

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE *[Signature]*

3/2/99

229-1250

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)