

2002 UNIFORM BUSINESS REPORT (UBR)

2/1
2/1FILED
May 01, 2002 8:00 am
Secretary of State

02-05-2002 90155 001 ****61.25

DOCUMENT # 748795

1. Entity Name

OCEAN SANDS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

14950 GULF BLVD
MADEIRA BEACH FL 33708
US

Mailing Address

14950 GULF BLVD
P O BOX 8396
MADEIRA BEACH FL 33738-8396
US

26284



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 59-2033384

Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GANO, GWEN
15000 GULF BLVD
UNIT 608
MADEIRA BEACH FL 33708

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when replacing)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	KANIA, RICHARD	
STREET ADDRESS	14950 GULF BLVD #802	
CITY-ST-ZIP	MADEIRA BEACH FL 33708	
TITLE	PD	☐ Delete
NAME	HAMILTON, ROGER	
STREET ADDRESS	14950 GULF BLVD UNIT 308	
CITY-ST-ZIP	MADEIRA BCH FL 33708	
TITLE	TD	☒ Delete
NAME	GANO, GWEN	
STREET ADDRESS	15008 GULF BLVD #808	
CITY-ST-ZIP	MADEIRA BEACH FL 33708	
TITLE	S	☒ Delete
NAME	KOSTER, JUDY	
STREET ADDRESS	14950 GULF BLVD #1006	
CITY-ST-ZIP	MADEIRA BEACH FL 33708	
TITLE	SD	☐ Delete
NAME	GORDON, MARSHA	
STREET ADDRESS	14950 GULF BLVD #708	
CITY-ST-ZIP	MADEIRA BEACH FL 33708	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	1ST VP	☐ Change ☐ Addition
NAME	KANIA, RICHARD	
STREET ADDRESS	14950 GULF BLVD # 802	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708	
TITLE	PROG	☐ Change ☐ Addition
NAME	HAMILTON, Roger	
STREET ADDRESS	14950 GULF BLVD #308	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708	
TITLE	CLIFFORD, NEWMAN	☐ Change ☐ Addition
NAME	CLIFFORD, NEWMAN	
STREET ADDRESS	14950 GULF BLVD # 707	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708	
TITLE	NATHAN HAMEROFF	☐ Change ☐ Addition
NAME	NATHAN HAMEROFF	
STREET ADDRESS	14950 GULF BLVD # 501	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708	
TITLE	SEC	☐ Change ☐ Addition
NAME	GORDON MARSHA	
STREET ADDRESS	14950 GULF BLVD # 708	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (9/01)

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:

MARSHA GORDON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #