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

Mar 08, 2006 8:00 am Secretary of State **DOCUMENT # 748795** 02-16-2006 90041 003 ****70.00 OCEAN SANDS CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 6600400 14950 GULF BLVD MADEIRA BEACH FL 33708 14950 GULF BLVD P O BOX 8396 MADEIRA BEACH FL 33738-8396 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/05) 1st MOORE City & State City & State Applied For 59-2033384 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LANGDON, WILLIAM Street Address (P.O. Box Number is Not Acceptable) الا JAN 3 1 2006 15000 GULF BLVD #818 MADERIA BEACH FL 33708 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. (MOTE: Registered Agent signature required whom remaining) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 7000 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change KANIA, RICHARD HARE NAME 14950 GULF BLVD #802 STREET ADDRESS STREET ACCIDENCES CITY-ST-ZIP MADERIA BEACH FL 33708 CffY-S1-2(P TITLE Delete TIFLE ☐ Change ☐ Addition GWEN, GANO HAME. NAME 15000 GULF BLVD # 608 STREET ADDRESS STREET ADDRESS MADERIA BEACH FL 33708 CITY-ST-7IP CITY: ST-7/P TITLE Delete TITLE C Addition LANGDON, WILLIAM NAME STREET ADDRESS 15000 GULF BLVD # 808 STREET ADDRESS CITY-ST-ZIP MADERIA BEACH FL 33708 CITY-ST-ZP TITLE ☐ Ocrete THE ☐ Change ☐ Addition NEWAN, CLIFFORD NAME NAME STREET ADDRESS 14950 GULF BLVD, #707 STREET ADDRESS CITY-ST-ZIP MADERIA BEACH FL 33708 CITY-ST-7P Delete UTLE ☐ Change ☐ Addition HUBBARD, VINTIN NAME NAME 14950 GULF BLVD #1206 STREET ADDRESS STREET ADDRESS MADERIA BEACH FL 33708 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$1-7IP CITY-ST-ZIP 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 early that I am an officer or director of the corporation or the reserver of 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 attaphment with an accress, with all other like empowered. SIGNATURE: 上

Date

NO TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

February 20, 2006

OCEAN SANDS CONDOMINIUM ASSOCIATION, INC. 14950 GULF BLVD P O BOX 8396 MADEIRA BEACH, FL 33738-8396 US

Subject: OCEAN SANDS CONDOMINIUM ASSOCIATION, INC.

Reference Number:

748795

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$70.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE

ANNUAL REPORTS SECTION

P.O. BOX 6327 - Tallahassee, Florida 32314