

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752257

FILED
Jan 20, 2009
Secretary of State

Entity Name: 1446 OCEAN DRIVE ASSOCIATION, INC.

Current Principal Place of Business:

1446 OCEAN DRIVE
MIAMI BEACH, FL 331394147

New Principal Place of Business:

Current Mailing Address:

309 23RD STREET
SUITE 300
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 59-1684364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGATTA REAL ESTATE MANAGEMENT
309 23RD STREET
SUITE 300
MIAMI BEACH, FL 33139 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: PD () Delete
Name: GORDON, CRAIG
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: GARANTE, FRAN
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI, FL 33139

Title: SD () Delete
Name: SAYAS, ESTER
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: GALI, ROLANDO
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: CURRAS, MARGARITA
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: STARR, RITA
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139 US

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: TD (X) Change () Addition
Name: WINCELE, HOWARD
Address: 1446 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

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: CRAIG GORDON

PD

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date