


**FILE NOW: FILING FEE IS \$61.25**

APPROVED  
FILED

99 MAR 19 AM 10:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0002158

<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 758524</b> 1. Corporation Name <b>OCEANS WEST HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>2 OCEANS WEST BLVD                  DAYTONA BEACH SHORES FL 32118                  US</b>			Mailing Address <b>2 OCEANS WEST BLVD                  DAYTONA BEACH SHORES FL 32118                  US</b>		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	05/27/1981	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	59-2160309	
24	Country	29	Country	Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/>	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent <b>DANIELS, DOUGLAS A                  523 NORTH HALIFAX AVENUE                  DAYTONA BEACH FL 32118</b>				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code

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: Douglas Daniels DATE: 2/16/99

Signature, typed or printed name of registered agent, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE#	DP <input type="checkbox"/> DELETE	1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERSTENBERGER, ROLAND	1.2 NAME	RAYMOND F. KAYEA
STREET ADDRESS	4 OCEANS WEST BLVD	1.3 STREET ADDRESS	4 Oceans West Blvd 602C
CITY-ST-ZIP	DAYTONA BEACH SHORES FL 32118	1.4 CITY-ST-ZIP	Daytona Beach Shores, FL 32118
TITLE#	VP <input type="checkbox"/> DELETE	2.1 TITLE	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VINCI, VINCE	2.2 NAME	Ethel Clark
STREET ADDRESS	3 OCEANS WEST BLVD	2.3 STREET ADDRESS	3 Oceans West Blvd 2C3
CITY-ST-ZIP	DAYTONA BEACH FL 32118	2.4 CITY-ST-ZIP	Daytona Beach Shores, FL 32118
TITLE#	TD <input type="checkbox"/> DELETE	3.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODEHEAVER, JOHN	3.2 NAME	John Clifford
STREET ADDRESS	4 OCEANS WEST BLVD	3.3 STREET ADDRESS	1 Oceans West Blvd 14A5
CITY-ST-ZIP	DAYTONA BEACH SHORES FL 32118	3.4 CITY-ST-ZIP	Daytona Beach Shores, FL 32118
TITLE#	SD <input type="checkbox"/> DELETE	4.1 TITLE	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, ETHEL	4.2 NAME	Harry Limauro
STREET ADDRESS	3 OCEANS WEST BLVD	4.3 STREET ADDRESS	1 Oceans West Blvd. 04A2
CITY-ST-ZIP	DAYTONA BEACH SHORES FL 32118	4.4 CITY-ST-ZIP	Daytona Beach Shores, FL 32118
TITLE#	VPD <input type="checkbox"/> DELETE	5.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LIMAURO, HARRY	5.2 NAME	Thomas Inglese
STREET ADDRESS	ONE OCEANS WEST BLVD, STE 04A2	5.3 STREET ADDRESS	3 Oceans West Blvd 3B1
CITY-ST-ZIP	DAYTONA BCH SHORES FL	5.4 CITY-ST-ZIP	Daytona Beach Shores, FL 32118
TITLE#	<input type="checkbox"/> DELETE	6.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	300002824643	6.2 NAME	Chris Patsio
STREET ADDRESS	-05/31/99--01008--025	6.3 STREET ADDRESS	4 Oceans West Blvd 101C
CITY-ST-ZIP	*****61.25 *****61.25	6.4 CITY-ST-ZIP	Daytona Beach Shores, FL 32118

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: Raymond F. Kayea DATE: 2/13/98 DAYTIME PHONE #: 904-788-2498

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)