

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007804

FILED
Feb 16, 2010
Secretary of State

Entity Name: OCEAN PARK (ON AMELIA ISLAND) CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HIGHWAY
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

GALPHIN REAL ESTATE SERVICES INC.
1880 S. 14TH STREET SUITE 103
AMELIA ISLAND, FL 32034

Current Mailing Address:

C/O AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HIGHWAY
FERNANDINA BEACH, FL 32034

New Mailing Address:

GALPHIN REAL ESTATE SERVICES INC.
1880 S. 14TH STREET SUITE 103
AMELIA ISLAND, FL 32034

FEI Number: 59-3755529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUIR, ROBERT C III
AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HIGHWAY
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

GALPHIN, WILLIAM
GALPHIN REAL ESTATE SERVICES INC.
1880 S. 14TH STREET SUITE 103
AMELIA ISLAND, FL 32034 US

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: NIP GALPHIN

02/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD
Name: COOPER, FREDERICK
Address: 403 TARPON AVE #201
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: PD
Name: VUTURO, MARK
Address: 31098 BOB O LINK
City-St-Zip: LIBERTYVILLE, IL 60048

Title: DT
Name: SASSER, ROBERT
Address: 2291 CHAUNCEY DR
City-St-Zip: WAYCROSS, GA 31501

Title: DS
Name: WAINWRIGHT, PATRICIA
Address: 403 TARPON AVE., #212
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: WILLAMS, MARGARET
Address: 403 TARPON AVE #323
City-St-Zip: FERNANDINA BEACH, FL 32034

I hereby 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 all other like empowered.

SIGNATURE: NIP GALPHIN

A

02/16/2010

Electronic Signature of Signing Officer or Director

Date