

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010698

FILED
Jun 30, 2005
Secretary of State

Entity Name: OCEAN OASIS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

225 NORTH ATLANTIC AVENUE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

2 RIVER FALLS
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 56-2471786 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOSLEY, CURTIS R
1221 EAST NEW HAVEN AVENUE
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

LAHAM, JAMES S
320 FORTENBERRY ROAD
MERRITT ISLAND, FL 32952 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: JAMES S. LAHAM

06/30/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVIS, LINDA
Address: 225 NORTH ATLANTIC AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: VD () Delete
Name: BOYD, CHARLES
Address: 225 NORTH ATLANTIC AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: SD () Delete
Name: HENDERSON, ROBIN
Address: 225 NORTH ATLANTIC AVENUE
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFMAN, TRUDY
Address: 225 NORTH ATLANTIC AVENUE, UNIT 302
City-St-Zip: COCOA BEACH, FL 32931

Title: VT (X) Change () Addition
Name: PIROG, F. STEVE
Address: 225 NORTH ATLANTIC AVENUE, UNIT 502
City-St-Zip: COCOA BEACH, FL 32931

Title: SD (X) Change () Addition
Name: HENDERSON, CHARLES
Address: 2 RIVER FALLS
City-St-Zip: COCOA BEACH, FL 32931

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES HENDERSON

SD

06/30/2005

Electronic Signature of Signing Officer or Director

Date