2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001457

FILED Feb 11, 2009 Secretary of State

Entity Name: OCEAN SPRAY HOTEL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10112 USA TODAY WAY MIRAMAR, FL 33025

Current Mailing Address: New Mailing Address:

10112 USA TODAY WAY MIRAMAR, FL 33025

FEI Number: 20-2348397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERDON, BARBARA

10112 USA TODAY WAY

MIRAMAR, FL 33025 US

SKRBIN, GEORGE

10112 USA TODAY WAY

MIRAMAR, FL 33025 US

MIRAMAR, FL 33025 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: GEORGE SKRBIN 02/11/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: P (X) Change () Addition

 Name:
 NOVA,, MAURICIO A
 Name:
 NOVA,, MAURICIO A

 Address:
 4130 COLLINS AVE.
 Address:
 4130 COLLINS AVE.

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: VP () Delete Title: () Change () Addition

 Name:
 MIZELL, KEITH
 Name:

 Address:
 4130 COLLINS AVE
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 HAWLEY, FRANCIS
 Name:

 Address:
 231 EAST EBD DRIVE
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 333149
 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: MAURICIO A. NOVA P 02/11/2009