

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008853

FILED
Apr 02, 2010
Secretary of State

Entity Name: OCEAN WALK AT NEW SMYRNA BEACH-BUILDINGS NO. 16 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4536 S CLYDE MORRIS BLVD
UNIT 2
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

4536 S CLYDE MORRIS BLVD
UNIT 2
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 51-0573630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALITY CONDOMINIUM MANAGEMENT
4536 S CLYDE MORRIS BLVD
UNIT 2
PORT ORANGE, FL 32129 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: P
Name: NORTON, JOHN
Address: 5265 S ATLANTIC AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S
Name: CLARK, DARRYL
Address: 1912 GERDA TER
City-St-Zip: ORLANDO, FL 32801

Title: T
Name: CALOGERO, JOHN
Address: 2614 CRESTWAY PARK
City-St-Zip: UTICA, NY 13501

Title: VP
Name: PHILLIPS, JIM
Address: 485 CLAGUE RD
City-St-Zip: BAY VILLAGE, OH 44140

Title: D
Name: MAHONEY, DONALD
Address: 46 HARVEST LANDE
City-St-Zip: SOUTH HAMPTON, NY 11968

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: JOHN NORTON

P

04/02/2010

Electronic Signature of Signing Officer or Director

Date