

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012723

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** OCEANIQUE OCEANFRONT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

925 NORTH COURTENAY PARKWAY, SUITE 28  
28  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

925 NORTH COURTENAY PARKWAY, SUITE 28  
28  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

**FEI Number:** 20-8067781

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOHRR, PHILIP F  
1795 W. NASA BLVD.  
MELBOURNE, FL 32901 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: DP  
Name: KODSI, ROBERT  
Address: P.O. BOX 320637  
City-St-Zip: COCOA BEACH, FL 329320637

Title: DS  
Name: JENKINS, HEATHER  
Address: P.O. BOX 320637  
City-St-Zip: COCOA BEACH, FL 329320637

Title: DT  
Name: KODSI, SARAH  
Address: P.O. BOX 320637  
City-St-Zip: COCOA BEACH, FL 329320637

Title: D  
Name: MEANS, KABRINA  
Address: 4180 N. A1A #1101B  
City-St-Zip: FT. PIERCE, FL 34949

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: ROBERT KODSI

DP

03/02/2011

Electronic Signature of Signing Officer or Director

Date