

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90098 003 ****61.25

DOCUMENT # N31378

1. Entity Name

OCEAN GROVE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O JOHN C. FLETCHER JR
 1660-2 BEACH AVE
 ATLANTIC BCH FL 32233
 US

C/O JOHN C. FLETCHER JR
 1660-2 BEACH AVE
 ATLANTIC BCH FL 32233-5807
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2986396

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLETCHER, JOHN C JR
1660-2 BEACH AVE
ATLANTIC BEACH FL 32233

Name
Charles F. Becky

Street Address (P.O. Box Number is Not Acceptable)
1660-5 Beach Ave.

City
Atlantic Beach

FL Zip Code
32233

8. 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 **Charles F. Becky**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-20-00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
	SD			<input checked="" type="checkbox"/>
	STUCK, BEVERLY	1660-3 BEACH AVE	ATLANTIC BEACH FL 32223	
	STD			<input checked="" type="checkbox"/>
	REITER, THOMAS M	1660 BEACH AVENUE, #2	ATLANTIC BCH FL	
	PD			<input type="checkbox"/>
	CHARLES, BECKY	1660-5 BEACH AVENUE	ATLANTIC BCH FL 32223	
	TD			<input checked="" type="checkbox"/>
	FLETCHER, JOHN	1660-2 BEACH AVE	ATLANTIC BCH FL 32223	
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
	STPD			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Charles F. Becky	1660-5 Beach Ave	Atlantic Beach, FL 32233		
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Charles F. Becky**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-00

Date

Daytime Phone #