

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31378

FILED
Jun 02, 2007
Secretary of State

Entity Name: OCEAN GROVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O CHARLES BECKY
1660-5 BEACH AVE.
ATLANTIC BEACH, FL 32233 US

Current Mailing Address:

C/O CHARLES BECKY
1660-5 BEACH AVE.
ATLANTIC BEACH, FL 32233 US

FEI Number: 59-2986396

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:

BECKY, CHARLES F
1660-5 BEACH AVE
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

C/O MARTIN T. WALSH
1660-4 BEACH AVE.
ATLANTIC BEACH, FL 32233 US

New Mailing Address:

C/O MARTIN T. WALSH
1660-4 BEACH AVE.
ATLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

WALSH, MARTIN T
1660-4 BEACH AVE
ATLANTIC BEACH, FL 32233 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: MARTIN T. WALSH

06/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STPD () Delete
Name: BECKY, CHARLES
Address: 1660-5 BEACH AVE.
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: D () Delete
Name: HART, JANE
Address: 1660-3 BEACH AVE.
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D () Delete
Name: WALSH, TOM
Address: 1660-4 BEACH AVE.
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BECKY, CHARLES
Address: 1660-5 BEACH AVE.
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STPD (X) Change () Addition
Name: WALSH, MARTIN T
Address: 1660-4 BEACH AVE.
City-St-Zip: ATLANTIC BEACH, FL 32233

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: MARTIN T. WALSH

STPD

06/02/2007

Electronic Signature of Signing Officer or Director

Date