

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33706

FILED
Mar 24, 2009
Secretary of State

Entity Name: OCEAN POINTE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

500 BURTON DRIVE
TAVERNIER, FL 33070

New Principal Place of Business:

Current Mailing Address:

107 HAMPTON ROAD
SUITE 100
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 65-0169432 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PROVIDENT ATLANTIC RESORTS
107 HAMPTON ROAD
SUITE 100
CLEARWATER, FL 33759 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: VD () Delete
Name: HEJNAS, ANDREW
Address: 127 SMITH CLOVE RD
City-St-Zip: CENTRAL VALLEY, NY 109173404

Title: PD () Delete
Name: WAGNER, RICHARD
Address: 1838 N. ELSTON AVE.
City-St-Zip: CHICAGO, IL 60622 12

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: HEJNAS, ANDREW
Address: 127 SMITH CLOVE RD
City-St-Zip: CENTRAL VALLEY, NY 10917

Title: PD (X) Change () Addition
Name: WAGNER, RICHARD
Address: 1838 N. ELSTON AVE.
City-St-Zip: CHICAGO, IL 60622

Title: STD () Change (X) Addition
Name: KALDON, ELEANOR
Address: 39 FORSGATE WAY
City-St-Zip: LAKEWOOD, NJ 08701

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: M SUE DOBSON

AGT

03/24/2009

Electronic Signature of Signing Officer or Director

Date