


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 16, 2006 8:00 am
Secretary of State

01-17-2006 90263 011 ****61.25

DOCUMENT # N99000006174			
1. Entity Name OCEAN WALK VILLAS CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1900 OCEAN WALK LANE LAUDERDALE BY THE SEA, FL 33062		Mailing Address 1702 CORDOVA RD. #2 FT. LAUDERDALE, FL 33062	
2. Principal Place of Business		3. Mailing Address <i>1322 S.E. 17th ST.</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>FT. LAUDERDALE, FL</i>	
Zip	Country	Zip <i>33316</i>	Country <i>BERMUDA</i>
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SALZILLO, JOSEPH 1900 OCEANWALK LANE #125 POMPANO BEACH, FL 33062		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD CENTER, JOHN 1900 OCEANWALK LANE #123 LAUDERDALE BY THE SEA, FL 33062 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PO NUNES, STEVE 2002 OCEANWALK TERRACE #200 POMPANO BEACH, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD SALZILLO, JOSEPH 1900 OCEANWALK LANE #125 129 LAUDERDALE BY THE SEA, FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TRUSTEE SALZILLO, JOSEPH 1900 OCEANWALK TERRACE #129 POMPANO BEACH FL. 33062 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD HAGENDORF, SANDRA 1900 OCEANWALK LANE #125 POMPANO BEACH, FL 33062 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD GILBERT, WADE 2002 OCEANWALK TERRACE #201 POMPANO BEACH, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Joseph V Salzillo</i>		Date: <i>2/2/06</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <i>TRUSTEE</i>		Daytime Phone # <i>954-785-8158</i>	

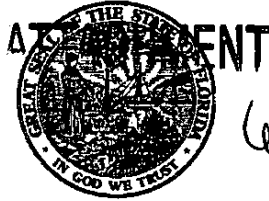
66001003



01072006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-3609903 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required...



66001634

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 24, 2006

OCEAN WALK VILLAS CONDOMINIUM ASSOCIATION, INC.
13225 E. 17TH ST.
FORT LAUDERDALE, FL 33316

Subject: OCEAN WALK VILLAS CONDOMINIUM ASSOCIATION, INC.

Reference Number: N99000006174

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION