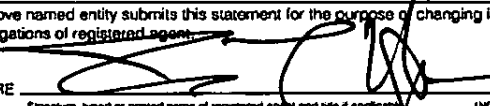
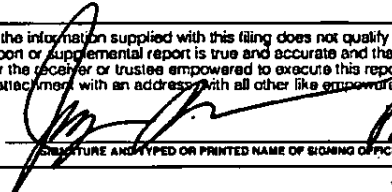


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State

02-23-2005 90059 050 ****61.25

DOCUMENT # N36502 1. Entity Name OCEANSIDE AT FISHER ISLAND CONDOMINIUM NO. TWO ASSOCIATION, INC.					
Principal Place of Business ONE FISHER ISLAND DRIVE 1 FISHER ISLAND DR. FISHER ISLAND, FL 33109 US			Mailing Address ONE FISHER ISLAND DRIVE 1 FISHER ISLAND DR. FISHER ISLAND, FL 33109 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0173588	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent LARSEN, RAY 7914 FISHER ISLAND DR FISHER ISLAND, FL 33109					
7. Name and Address of New Registered Agent Name Michael Hyman Street Address (P.O. Box Number is Not Acceptable) 150 West Flagler Street 27th Floor Museum Tower City Miami FL Zip Code 33130					
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 3/25/05 (NOTE: Registered Agent signature required when releasing)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LARSEN, RAY ☐ Delete 7914 FISHER ISLAND DR FISHER ISLAND, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GERSTEIN, GARY ☐ Delete 7965 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GERSTEIN, GARY ☒ Delete 7957 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KATE, MICHAEL ☒ Change ☐ Addition 7955 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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:  DATE 1/17/05 305-532-3144 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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01112005 Chg-NP CR2E037 (10/03)