


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90194 037 ****61.25

DOCUMENT # 748798			
1. Entity Name OCEAN TERRACE NORTH CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business OCEAN TERRACE NORTH HIGHLAND BCH, FL 33487		Mailing Address 3115 S OCEAN BLVD HIGHLAND BEACH FL 33487	
2. Principal Place of Business 3115 S OCEAN BLVD		3. Mailing Address 3115 S OCEAN BLVD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Highland Beach FL		City & State Highland Beach FL	
Country PALM BEACH		Country PALM BEACH	
Zip 33487		Zip 33487	
4. FEI Number 59-2063836		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERT STEPHENS 3115 SOUTH OCEAN BLVD HIGHLAND BEACH, FL 33487		7. Name and Address of New Registered Agent Name: ROBERT STEPHENS Street Address (P.O. Box Number is Not Acceptable): 3115 S OCEAN BLVD City: Highland Beach FL Zip Code: 33487	
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: <i>[Signature]</i>		DATE: 8 APR 05	
Filing Fee is \$61.25 Due by May 1, 2005		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: P	NAME: FERRE, ANTONIO <input checked="" type="checkbox"/> Delete	TITLE: P	NAME: ROBERT STEPHENS <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS:	3115 S OCEAN BLVD	STREET ADDRESS:	3115 S OCEAN BLVD
CITY-ST-ZIP:	HIGHLAND BEACH, FL 33487	CITY-ST-ZIP:	HIGHLAND BEACH FL 33487
TITLE: S	NAME: RUKEYSER, PHYLLIS <input type="checkbox"/> Delete	TITLE: S	NAME: VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:	3115 S OCEAN BLVD	STREET ADDRESS:	
CITY-ST-ZIP:	HIGHLAND BEACH, FL 33487	CITY-ST-ZIP:	
TITLE: S	NAME: STEPHENS, CATHY <input checked="" type="checkbox"/> Delete	TITLE: S	NAME: RAYMOND ZUCKERMAN <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS:	3115 S OCEAN BLVD #1003	STREET ADDRESS:	3115 S OCEAN BLVD
CITY-ST-ZIP:	HIGHLAND BEACH, FL 33487	CITY-ST-ZIP:	33487
TITLE: D	NAME: MEROE, TED <input type="checkbox"/> Delete	TITLE:	NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:	3115 S OCEAN BLVD #302	STREET ADDRESS:	
CITY-ST-ZIP:	HIGHLAND BEACH, FL 33487	CITY-ST-ZIP:	
TITLE: T	NAME: THOMAS, ROBERT <input checked="" type="checkbox"/> Delete	TITLE: T	NAME: THOMAS, ROBERT <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS:	3115 SOUTH OCEAN BLVD	STREET ADDRESS:	3115 S OCEAN BLVD
CITY-ST-ZIP:	HIGHLAND BEACH, FL 33487	CITY-ST-ZIP:	HIGHLAND BEACH FL 33487
TITLE:	NAME: <input type="checkbox"/> Delete	TITLE:	NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		STREET ADDRESS:	
CITY-ST-ZIP:		CITY-ST-ZIP:	
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: <i>[Signature]</i>		DATE: 8 APR 05 5612799644	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	