

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008853

FILED
Apr 16, 2012
Secretary of State

Entity Name: OCEAN WALK AT NEW SMYRNA BEACH-BUILDINGS NO. 16 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

QUALITY CONDO MGMT
1100 OCEAN SHORE BLVD., SUITE 12
ORMOND BEACH, FL 32175

New Principal Place of Business:

5300 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

QUALITY CONDO MGMT
P.O. BOX 1527
ORMOND BEACH, FL 32175

New Mailing Address:

C/O SURFCOAST REALTY INC
366 FLAGLER AVENUE
NEW SMYRNA BEACH, FL 32169

FEI Number: 51-0573630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERTL & KISTEMAKER BUSINESS LAW GROUP
1651 N. CLYDE MORRIS BLVD.
SUITE 2
DAYTONA BEACH, FL 32117 US

Name and Address of New Registered Agent:

SURFCOAST REALTY INC.
366 FLAGLER AVENUE
NEW SMYRNA BEACH, FL 32169 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: ROBERT DEL ROSE

04/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PHILLIP, JAMES V
Address: 485 CLAGUE RD
City-St-Zip: BAY VILLAGE, OH 44140

Title: VP
Name: CLARK, DARRYL
Address: 1912 GERDA TER
City-St-Zip: ORLANDO, FL 32801

Title: T
Name: CALOGERO, JOHN
Address: 2614 CRESTWAY PARK
City-St-Zip: UTICA, NY 13501

Title: S
Name: DEVENNEY, MARGO
Address: 5300 S. ATLANTIC AVENUE, UNIT 16-605
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPND
Name: MAHONEY, DONALD
Address: 46 HARVEST LANDE
City-St-Zip: SOUTH HAMPTON, NY 11968

Title: D
Name: TAURINS, INDY
Address: 5300 S. ATLANTIC AVENUE, UNIT 16-603
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby 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 all other like empowered.

SIGNATURE: ROBERT DEL ROSE

RA

04/16/2012

Electronic Signature of Signing Officer or Director

Date