

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90241 001 *1,350.00

DOCUMENT # 385800 1. Entity Name OCEAN RIDGE MANAGEMENT, INC.			
Principal Place of Business 6849 N. OCEAN BLVD. OCEAN RIDGE, FL 33435		Mailing Address 6849 N. OCEAN BLVD. OCEAN RIDGE, FL 33435	
2. Principal Place of Business 6855 N. Ocean Blvd Suite, Apt. #, etc.		3. Mailing Address 6855 N. Ocean Blvd Suite, Apt. #, etc.	
City & State Ocean Ridge, FL Zip 33435 Country		City & State Ocean Ridge, FL Zip 33435 Country	
4. FEI Number 59-1361358		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HARRISON, CAROL GM OCEAN RIDGE MANAGEMENT, INC. 6840 N. OCEAN BLVD. OCEAN RIDGE, FL 33435		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 6855 N. Ocean Blvd. City Ocean Ridge FL Zip Code 33435	
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 4-11-06 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRABNER, GEORGE 6849 N OCEAN BLVD OCEAN RIDGE, FL 33435 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Powers, Roger 6855 N. Ocean Blvd Ocean Ridge, FL 33435 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ANDRAS, JOHN 6849 N. OCEAN BLVD. OCEAN RIDGE, FL 33435 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HARRISON, Carol 6855 N. Ocean Blvd. Ocean Ridge, FL 33435 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HUDSON, GILBERT 6849 N. OCEAN BLVD. OCEAN RIDGE, FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6855 N. Ocean Blvd <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MACKECHNIE, ANDREW 6849 N OCEAN BLVD OCEAN RIDGE, FL 33435 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Boardman, William 6855 N. Ocean Blvd. Ocean Ridge, FL 33435 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MCKINNEY, JOHN 6849 N OCEAN BLVD OCEAN RIDGE, FL 33435 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AALFs, Jack 6855 N. Ocean Blvd. Ocean Ridge, FL 33435 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOLTE, HENRY 6849 N OCEAN BLVD OCEAN RIDGE, FL 33435 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Slincy, David 6855 N. Ocean Blvd Ocean Ridge, FL <input type="checkbox"/> Change <input checked="" 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 607, 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 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4-11-06 Daytime Phone # 737-6770	

66010894



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