

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 688268

Entity Name: OCEAN DECK, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

127 SOUTH OCEAN AVE.
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

127 SOUTH OCEAN AVE.
DAYTONA BEACH, FL 32118

New Mailing Address:

FEI Number: 59-2032330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEOUGH, KING R
5795 JOHN ANDERSON HWY
FLAGLER BCH., FL 32136 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: KEOUGH, KING R.,
Address: 5795 JOHN ANDERSON HWY
City-St-Zip: FLAGLER BCH., FL 32136

Title: VP () Delete
Name: BOTS, KENNETH J
Address: 6201 OAK RIVER TER
City-St-Zip: PORT ORANGE, FL 32127

Title: VP () Delete
Name: KUFTIC, VERNON
Address: 1507 NO PENINSULA AVE
City-St-Zip: DAYTONA BCH, FL

Title: VP () Delete
Name: PHILLIPS, MARJORIE
Address: 43 JAVA DR
City-St-Zip: PORT ORANGE, FL 32127

Title: VP () Delete
Name: MONDAY, BRIAN
Address: 155 SWEETGUM LANE
City-St-Zip: DAYTONA BEACH, FL 32119

Title: VP () Delete
Name: VISNAW, ROBERT
Address: 616 6TH STREET
City-St-Zip: DAYTONA BEACH, FL 32117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VERNON KUFTIC

VP

01/13/2009

Electronic Signature of Signing Officer or Director

Date