

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90061 030 ****61.25

DOCUMENT # 708344

1. Entity Name

OCEAN SUMMIT ASSOCIATION, INC. (A CONDOMINIUM ASSOCIATION)



Principal Place of Business

4010 GALT OCEAN DRIVE
FORT LAUDERDALE FL 33308

Mailing Address

4010 GALT OCEAN DRIVE
FORT LAUDERDALE FL 33308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

59-1092464

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOWENTHAL, LEE
4010 GALT OCEAN DR APT 214
FORT LAUDERDALE FL 33308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: 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 **BRACCHI, DONNA T** ☐ Delete
NAME
STREET ADDRESS 4010 GALT OCEAN DR APT 405
CITY-ST-ZIP FT. LAUDERDALE FL 33308

TITLE **TD** ☐ Delete
NAME BAILEY, RUSSELL A.
STREET ADDRESS 4010 GALT OCEAN DRIVE - APARTMENT 1510
CITY-ST-ZIP FT LAUDERDALE FL

TITLE **LADISLAV, NEMEC** ☐ Delete
NAME
STREET ADDRESS 4010 GALT OCEAN DR. APT 1507
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE **DAWSON, DOUGLAS** ☐ Delete
NAME
STREET ADDRESS 4010 GALT OCEAN APT 204
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE **COMIS, JAMES** ☐ Delete
NAME
STREET ADDRESS 4010 GALT OCEAN DR APT 406
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE **WHEAT, LEE** ☐ Delete
NAME
STREET ADDRESS 4010 GALT OCEAN # 1406
CITY-ST-ZIP FORT LAUDERDALE FL 33308

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-05 954-565 8696