

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718281

FILED
Apr 25, 2011
Secretary of State

Entity Name: OXFORD CONDOMINIUM APARTMENT ASSOCIATION, INC. 400

Current Principal Place of Business:

209 OXFORD 400
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

Current Mailing Address:

OXFORD 400 C/O SEACREST SERVICES INC
2400 CENTREPARK W DR #175
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 59-1636133 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEVINE, ZETA
219 OXFORD 400
WEST PALM BEACH, FL 33417 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

OFFICERS AND DIRECTORS:

Title: P
Name: DAVIDOVICH, ALEX
Address: 209 OXFORD 400
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP
Name: BENDERSKY, LEONID
Address: 104 OXFORD 400
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T
Name: SHAKHET, ALLA
Address: 208 OXFORD 400
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S
Name: SUSSMAN, MARILYN
Address: 217 OXFORD 400
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D
Name: WALDMAN, BONNIE
Address: 108 OXFORD 400
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D
Name: FIEBERT, HARRIET
Address: 204 OXFORD 400
City-St-Zip: WEST PALM BEACH, FL 33417 US

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: GALE CORONA

MGRM

04/25/2011

Electronic Signature of Signing Officer or Director

Date