2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007
Secretary of State

DOCUMENT# 723731

Entity Name: THIRD OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2001 9TH AVE
308
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

2001 9TH AVE
308
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 59-1525258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, WILLIAM F
KEYSTONE PROPERTY MGMT GROUP INC
2001 9TH AVE, SUITE 308
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

MILLER, WILLIAM F
2001 9TH AVENUE
#308
VERO BEACH, FL 32960 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: WILLIAM F. MILLER 02/19/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: SIMMENS, ALLEN
Address: 4450 N. A1A #204
City-St-Zip: VERO BEACH, FL 32963

Title: S ( ) Delete
Name: CAPOZZOLI, EILEEN
Address: 4450 NORTH A1A, #306
City-St-Zip: VERO BEACH, FL 32963

Title: VPD ( ) Delete
Name: CURZIO, CASPER
Address: #204, 4450 NORTH AIA
City-St-Zip: VERO BEACH, FL 32963

Title: PD ( ) Delete
Name: CAPOZZOLI, FRED
Address: 4450 NORTH A1A, #306
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete
Name: LIEBECK, MICHAEL
Address: #103 4450 NORTH AIA
City-St-Zip: VERO BEACH, FL 32963

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
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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERICK CAPOZOLI PD 02/19/2007
Electronic Signature of Signing Officer or Director Date