2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 08, 2006 **DOCUMENT#725873** Secretary of State

Entity Name: OAKLAND SHORES CONDOMINIUM #1, INC.

Current Principal Place of Business: New Principal Place of Business:

3127 OAKLAND SHORES DRIVE OAKLAND PARK, FL 33309

Current Mailing Address: New Mailing Address:

3127 OAKLAND SHORES DRIVE OAKLAND PARK, FL 33309

FEI Number: 59-1549650 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVIN, CHERYL J ESQ 4694 NW 103RD AVE US SUNRISE, FL 33351

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition GORDON, SUSAN E ZUROSKY, PATRICIA Name: Name:

3127 OAKLAND SHORES DRIVE Address: 3127 OAKLAND SHORES DRIVE Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: OAKLAND PARK, FL 33309

Title: VD Title: VD (X) Change () Addition () Delete

GRIMSLEY, JAMES Name: FRAZER, RICHARD Name:

Address: 3127 OAKLAND SHORES DRIVE Address: 3127 OAKLAND SHORES DRIVE City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: OAKLAND PARK, FL 33309

Title: SD () Delete Title: () Change () Addition

BOGASKI, ZARA Name: Name: 3127 OAKLAND SHORES DRIVE Address: Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

Name: BIVENS, ALLEN Name: 3127 OAKLAND SHORES DRIVE Address: Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip:

Title: ASD () Delete Title: ASD (X) Change () Addition

FRAZER, RICHARD Name: Name: COOPER, JACK

3127 OAKLAND SHORES DRIVE 3127 OAKLAND SHORES DRIVE Address: Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: OAKLAND PARK, FL 33309

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: ALLEN BIVENS TD 09/08/2006