2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729515

FILED Mar 16, 2009 Secretary of State

Entity Name: NUMBER ONE NORTH OCEAN ASSOCIATION INC

	iid: NONBER	CONETTOICHT COLANTA				
Current Principal Place of Business:				New Principal Place of Business:		
	H OCEAN BLY CH, FL 33480					
Current Mailing Address:				New Mailing Address:		
	H OCEAN BLY CH, FL 33480					
FEI Number:	59-1638486	FEI Number Applied For () FEI Numbe	er Not Applie	licable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Ager	nt: Na	ame and	Address of New Registered Agent:	
	CH, FL 33480 named entity of Florida.		the purpose of cl	hanging its	its registered office or registered agent, or bot	
0.0.0.		nic Signature of Registere	d Agent		Date	
OFFICERS AND DIRECTORS:			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD () EPPLER, HEIN 150 NO. OCEA PALM BEACH,	N BLVD., #403	Na Ad	tle: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LEIB, ALDEN 150 N OCEAN PALM BEACH,		Na Ad	tle: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPSD () BLACKMAN, M 150 N OCEAN PALM BEACH,	BLVD.	Na Ad	tle: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ZELNICK, MAR 150 N OCEAN PALM BEACH,	BLVD	Na Ad	tle: ame: ldress: ty-St-Zip:	DT (X) Change () Addition ZELNICK, MARILYN 150 N OCEAN BLVD PALM BEACH, FL 33480	
Title: Name: Address: City-St-Zip:	D () GURWIN, PHY 150 NORTH OO PALM BEACH,,	CEAN	Na Ad	ile: ame: ldress: ty-St-Zip:	() Change () Addition	

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

SIGNATURE: RUTH TAYLOR MGR 03/16/2009