## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## **DOCUMENT#731463**

FILED Oct 04, 2007 Secretary of State

Entity Name: OCEANS FIVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2987 SOUTH ATLANTIC AVE. DAYTONA BEACH SHORES, FL 32118 **Current Mailing Address: New Mailing Address:** 2987 SOUTH ATLANTIC AVE DAYTONA BEACH SHORES, FL 32118 FEI Number: 59-1859182 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOODWIN, MORRIS 150 DUNDÉE RD. DAYTONA BEACH, FL 32118 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: MORRIS GOODWIN Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete SNYDER, GLENDA SNYDER, GLENDA Name: Name: 2987 S. ATLANTIC AVE #303 Address: 2987 S. ATLANTIC AVE #303 Address: City-St-Zip: DAYTONA BEACH, FL 32118 City-St-Zip: DAYTONA BEACH, FL 32118 Title: Title: ( ) Delete () Change () Addition FERNANDEZ, LISSETTE Name: Name: Address: 2987 S ATLANTIC AVE. # 1803 Address: City-St-Zip: DAYTONA BEACH SHRS, FL 32118 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition REILLY, YOLANDA REILLY, YOLANDA Name: Name: 2987 S ATLANTIC AVE UNIT 703 2987 S ATLANTIC AVE UNIT 703 Address: Address: City-St-Zip: DAYTONA BEACH, FL 321198 City-St-Zip: DAYTONA BEACH, FL 32118 Title: () Delete Title: ( ) Change (X) Addition Name: Name: HUFFMAN, DON 2987 S. ATLANTIC AVE UNIT 602 Address: Address: City-St-Zip: City-St-Zip: DAYTONA BEACH, FL 32118 Title: () Delete Title: ( ) Change (X) Addition Name: Name: WADE, BETTY 2987 S. ATLANTIC AVE UNIT 504 Address: Address: City-St-Zip: City-St-Zip: DAYTONA BEACH, FL 32118 Title: () Delete Title: ( ) Change (X) Addition GONZALES, ERIKA Name: Name: Address: Address: 2987 S. ATLANTIC AVE UNIT 404 DAYTONA BEACH, FL 32118 City-St-Zip: City-St-Zip:

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: DON HUFFMAN P 10/04/2007