

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732763

FILED
Apr 29, 2008
Secretary of State

Entity Name: OCEAN INLET YACHT CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2100 N. PENINSULA AVE.
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

2100 N PENINSULA AVE
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

P. O. BOX 2749
DAYTONA BEACH, FL 32115 US

FEI Number: 59-1672772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKER, PATTI A.
C/O NORTH SHORE MANAGEMENT GROUP
533 N. NOVA RD STE 211
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

BARKER, PATTI A.
C/O NORTH SHORE MANAGEMENT GROUP
313 SOUTH ATLANTIC AVE
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:

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, WILLIAM
Address: 147 VARIETY TREE CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: CHASE, STEVEN
Address: 2100 N PENINSULA AVE #114
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D () Delete
Name: MILLER, STEPHEN
Address: 4528 NORMANDALE HIGHLANDS CIRCLE
City-St-Zip: BLOOMINGTON, MN 55437

Title: VPD () Delete
Name: SOPER, BRENDA
Address: 1619 RUTLEDGE ROAD
City-St-Zip: LONGWOOD, FL 32779

Title: STD () Delete
Name: MCFADDEN, LOIS
Address: 2100 N PENINSULA #304
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MILLER, STEPHEN
Address: 5100 WEST 102ND STREET #103
City-St-Zip: BLOOMINGTON, MN 55437

Title: VPD (X) Change () Addition
Name: MONROE, TODD
Address: 9167 ROYAL GATE DRIVE
City-St-Zip: WINDEMERE, FL 34786

Title: () Change () Addition
Name:
Address:
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: WILLIAM MILLER

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date