

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733757

FILED
Mar 16, 2009
Secretary of State

Entity Name: 330 SOUTH OCEAN, INC.

Current Principal Place of Business:

330 SOUTH OCEAN BLVD.
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

330 SOUTH OCEAN BLVD.
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-1741534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
625 NORTH FLAGLER DRIVE 7TH FLOOR
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: BAKER, JON
Address: 330 S. OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: P () Delete
Name: GRIFFITH, BRAD
Address: 330 S OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: ALTON, ROBERT
Address: 330 S. OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: VP () Delete
Name: MILSTEIN, RICHARD
Address: 330 S OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: CLIFFORD, STEWART
Address: 330 S OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

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 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: BRAD GRIFFITH

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date