

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2008 8:00 am**  
**Secretary of State**

05-02-2008 90166 003 \*\*\*\*61.25

<b>DOCUMENT # 736215</b> 1. Entity Name OCEAN LAKEVIEW CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2455 FLAMINGO DR. MIAMI BEACH, FL 33140			Mailing Address 2455 FLAMINGO DR. MIAMI BEACH, FL 33140		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1887253	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
FERNETY, DANA 2455 FLAMINGO DRIVE SUITE 206 MIAMI BEACH, FL 33140				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FERNETY, DANA 2455 FLAMINGO DRIVE MIAMI BEACH, FL 33140		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DAUM, JEFFREY 2455 FLAMINGO DRIVE MIAMI BEACH, FL 33140	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HAZLETT, JOSEPH 2455 FLAMINGO DR. MIAMI BEACH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAZLETT, JOSEPH 2455 FLAMINGO DRIVE MIAMI BEACH, FL 33140	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GARCIA, RICHARD 2455 FLAMINGO DR. MIAMI BEACH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRURY, JOSEPH 2455 FLAMINGO DR. MIAMI BEACH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LORET DE MOLA, JORGE 2455 FLAMINGO DRIVE MIAMI BEACH, FL 33140		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KOHL, PAMELA 2455 FLAMINGO DRIVE MIAMI BEACH, FL 33140		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <u>Ricardo Garcia</u> <b>RICARDO GARCIA, TREASURER</b> <u>4/29/08</u> <u>(305) 532-5237</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					