



# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90402 022 \*\*\*\*61.25

<b>DOCUMENT # 738942</b> 1. Entity Name <b>OCEANTREE CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business 3400 N OCEAN DR. SINGER ISLAND, FL 33404-0201				Mailing Address 3400 N OCEAN DR. SINGER ISLAND, FL 33404-0201	
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		<b>40073803</b>  	
City & State		City & State		04262006    Chg-NP    CR2E037 (11/05)	
Zip		Country		4. FEI Number <b>59-1745332</b>	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b>  <b>FIELDS, GARY D ATT</b> <b>ADMIRALTY BUILDING SUITE 700</b> <b>4400 PGA BOULEVARD</b> <b>PALM BEACH GARDENS, FL 33410</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ADLER, ELI 3400 N OCEAN DRIVE #1401 SINGER ISLAND, FL 33404 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Adler, ELI 3400 N. Ocean Dr. #1401 Singer Island, FL 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COSTELLO, PAUL 3400 N. OCEAN DRIVE #508 SINGER ISLAND, FL 33404 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Tucker, Joan L. 3400 N. Ocean Drive #1702 Singer Island, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAW, LARRY 3400 N OCEAN DRIVE #1705 SINGER ISLAND, FL 33404 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	YPO Law, Larry 3400 N. Ocean Drive #1705 Singer Island, FL 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, HOWARD S 3400 N OCEAN DR #1406 SINGER ISLAND, FL 33404 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Tulloch, John 3400 N. Ocean Dr. #1008 Singer Island, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DZIEDZIC, RICHARD 3400 N. OCEAN DRIVE #404 SINGER ISLAND, FL 33404 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bremer, Hermann 3400 N. Ocean Dr. #307 Singer Island, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRIFFIN, LARRY 3400 N. OCEAN DRIVE #706 SINGER ISLAND, FL 33404 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Griffin, Larry 3400 N. Ocean Dr. #706 Singer Island, FL 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
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> <i>Joan L. Tucker</i> April 25, 2006    561-842-3529 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>					

ATTACHMENT

40075805

#738942

April 25, 2006

Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

To Whom I May Concern:

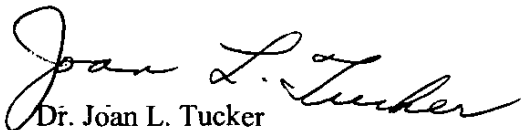
Enclosed is the 2006 Not-For-Profit Corporation Annual Profit for Oeantree Condominium Association, Inc. and a check for \$61.25.

Although I am mailing this report and check prior to the May 1, 2006 deadline, it is my understanding that it should have been mailed earlier so it could be processed prior to May 1. Our condominium manager resigned rather unexpectedly, so until we get a new manager hired, we, the Board members, are doing what needs to be done. Unfortunately, we just discovered that this annual report was not filed earlier. Therefore, I hope you will accept our apologies and not charge us a late penalty fee.

Please call me at (561) 842-3529 or (561) 531-9647 if you have questions or need further information.

Thank you.

Sincerely,



Dr. Joan L. Tucker  
Secretary, Board of Directors  
Oeantree Condominium  
3400 N. Ocean Drive #1702  
Singer Island, Florida 33404