

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742838

FILED
Apr 08, 2005
Secretary of State

Entity Name: OCEAN EAST GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 1621
STUART, FL 34995 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1621
STUART, FL 34995 US

New Mailing Address:

FEI Number: 59-2053277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPADER, ELLEN
2440 SE OCEAN BLVD.
A106
STUART, FL 34996 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: S () Delete
Name: SKOGLUND, LINDA
Address: 2440 SE OCEAN BLVD. A205
City-St-Zip: STUART, FL 34996

Title: P () Delete
Name: SPADER, ELLEN
Address: 2440 E. OCEAN BLVD. A106
City-St-Zip: STUART, FL 34996

Title: T () Delete
Name: MEISSNER, MARY
Address: 2440 E. OCEAN BLVD B-205
City-St-Zip: STUART, FL 34995

Title: D (X) Delete
Name: RICHBERG, CONNIE
Address: 2440 EAST OCEAN BLVD. B102
City-St-Zip: STUART, FL 34995

Title: D () Delete
Name: FAZIO, VINNIE
Address: 2440 SE OCEAN BLVD. B103
City-St-Zip: STUART, FL 34996

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 for the exemption stated in Section 119.07(3)(i), 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: ELLEN A. SPADER

P

04/08/2005

Electronic Signature of Signing Officer or Director

Date