

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744972

FILED
Aug 25, 2005
Secretary of State

Entity Name: OCEANS III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

935 SWEETWATER LANE #103
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 186
BOCA RATON, FL 33429 US

New Mailing Address:

FEI Number: 59-1884029 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BURDA, MICHELE
935 SWEETWATER LANE #103
BOCA RATON, FL 33431 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: PD () Delete
Name: BURDA, MICHELLE,
Address: 935 SWEETWATER LN #103
City-St-Zip: BOCA RATON, FL 33431

Title: STD () Delete
Name: SULLIVAN, DONALD
Address: 57 BUTTERS RON
City-St-Zip: WILMINGTON, MA 01887

Title: D () Delete
Name: CORKUM, MARK
Address: 941 SWEETWATER LANE #206
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: SULLIVAN, DONALD
Address: 57 BUTTERS ROW
City-St-Zip: WILMINGTON, MA 01887

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: MICHELE BURDA

PRES

08/25/2005

Electronic Signature of Signing Officer or Director

Date