2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# 745738

Entity Name: OCEAN PARK NORTH ASSOCIATION, INC.

Current Principal Place of Business:

350 TAYLOR AVE
B24
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

350 TAYLOR AVE
B24
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

FEI Number: 59-2090961 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERR, GARY
329 TAFT AVE.
COCOA BEACH, FL 32931 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: D ( ) Delete
Name: SEGALLA, JOHN
Address: 310 TAYLOR AVE C-22
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D ( ) Delete
Name: GIBSON, JOE
Address: 350 TAYLOR AVE B-8
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D ( ) Delete
Name: ARREDONDO, ALBERT
Address: 350 TAYLOR AVE B-10
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D ( ) Delete
Name: DEHANN, ANNA
Address: 350 TAYLOR AVE B1
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D ( ) Delete
Name: SCHERM, CAROL
Address: 375 POLK AVE. A-6
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D ( ) Delete
Name: WARD, JACQUELINE
Address: 375 POLK AVE. A-2
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: DIANA, ANNA
Address: 350 TAYLOR AVE B-20
City-St-Zip: CAPE CANAVERAL, FL 32920

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: GARY HERR OFCR 03/19/2009

Electronic Signature of Signing Officer or Director — Date