

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 05, 2009
Secretary of State**

DOCUMENT# 748139

Entity Name: OCEAN MIST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

200 N 1 ST
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

200 N. 1ST ST.
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-1968756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEILSEN, ALICE
315 BUCHANAN AVE #101
CAPE CANAVERAL, FL 32920 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: LYONS, RON
Address: 302 LINCOLN AVE # 3
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: TD () Delete
Name: NIELSEN, ALICE
Address: 315 BUCHANAN AVE., #101
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SD () Delete
Name: PHILLIPS, BARBARA
Address: 302 LINCOLN AVE # 5
City-St-Zip: CAPE CANAVERAL, FL 32920

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:

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: ALICE NEILSEN

D

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date