2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748465

FILED Feb 18, 2011 Secretary of State

Entity Name: OCEANRISE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10310 S. OCEAN DR. SUITE 105

JENSEN BEACH, FL 34957

Current Mailing Address: New Mailing Address:

10310 S. OCEAN DR. SUITE 105 JENSEN BEACH, FL 34957

FEI Number: 59-1942759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORNETT, JANE

WACKEEN, CORNETT & GOOGE, P.A.

401 E. OSCEOLA ST.

STUART, FL 34994 US

ROSS, DEBORAH

759 SOUTH FEDERAL HWY
212

STUART, FL 34994 US

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: DEBORAH ROSS 02/18/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: MCDONALD, WMG
Address: 10264 CONTINENTAL DR
City-St-Zip: TAYLOR, MI 48180

Title: VPD

Name: LAMPHERE, JUDY
Address: 431 CURWOOD DR.
City-St-Zip: OWOSSO, MI 48567

Title:

Name: SANTORELLA, COURTNEY
Address: 163 PEPPER LANE
City-St-Zip: JENSEN BEACH, FL 34957

Title: SD

 Name:
 FOLEY, IRWIN

 Address:
 1407 MADISON PL

 City-St-Zip:
 WAPAKONETA, OH 48595

Title: P/TD

 Name:
 PARENT, DAVID

 Address:
 10310 S OCEAN DR #501

 City-St-Zip:
 JENSEN BEACH, FL 34957

I hereby 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 all other like empowered.

SIGNATURE: KATHERINE CIMPI LCAM 02/18/2011