2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Feb 19, 2007 8:00 am **Secretary of State DOCUMENT #749384** 02-19-2007 90049 036 ****61.25 THE OCEANA SOUTH CONDOMINIUM II ASSOCIATION, Principal Place of Business Mailing Address 10600 SOUTH OCEAN DRIVE 10600 SOUTH OCEAN DRIVE 40019939 JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 02132007 Chg-NP CR2E037 (12/06) 4. FEi Number 59-2120245 City & State Applied For City & State Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Evans MACCHIA, NICK Street Address (P.O. Box Number is Not Acceptable) 10600 S OCEAN DRIVE JENSEN BEACH, FL 34957 Zip Code 34957 City anse 8. 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. I am familiar with, and accept the obligations of registered agent. PRESIDENT DONALD EVANS, ans 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee Is \$61.25 Florida Department of State Trust Fund Contribution. Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change 📈 Addition Delete TITLE TITLE EVANS, DOWALD 10600 SOUTH OCEAN DRIVE #901 SCHWEITZER, LINDA NAME NAME 10600 S OCEAN DRIVE #1207 STREET ADDRESS STREET ADDRESS Jensen Beach FL 34957 CITY-ST-ZIP CITY-ST-ZIP JENSON BEACH, FL 34994 Change Addition Delete TITLE TITLE RICH, ARTHUR KOKENOS, PERRY 10600 SOUTH OCEAN DRIVE - 806 NAME NAME STREET ADDRESS 10600 S. OCEAN DR. #903 STREET ADDRESS Jansen Beach FL 34957 CITY-ST-ZIP JENSEN BEACH, FL 34957 CITY-ST-ZIP ☐ Defete TITLE ☐ Addition TITLE PARCELLS, ROBERT 10600 SOUTH OCEAN DRIVE PARCELS, BOB NAME NAME 1060 S. OCEAN DR. #901 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Jensen Beach FL 34957 JENSEN BEACH, FL 34957 CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

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CARLSON, ATTHUR B, J

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Jensen Beach FL 34957

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CITY-ST-ZIP

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CITY-ST-ZIP

CARLSON, ART

MACCHIA, NICK

10600 S OCEAN DRIVE #1D

JENSEN BEACH, FL 34957

10600 \$ OCEAN DRIVE

JENSEN BEACH, FL 34957

SIGNATURE: LINALU ELLAND DONALD EVANS PRESIDENT 2/13/07 773-229-38899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date