2006 NOT-FOR-PROFIT CORPORATION

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _

May 03, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #749583** 05-03-2006 90256 006 ****61.25 1. Entity Name OCEÁN WINDS, INC. Principal Place of Business Mailing Address ATLANTIC COMM ASSOC MGMT& ACC. INC. OCEAN WINDS CONDO 2101 N. ATLANTIC AVE 507 HERBERT ST., STE.C PORT ORANGE, FL 32129 DAYTONA BEACH, FL 32118 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122006 CR2E037 (11/05) Chg-NP City & State City & State 4. FEI Number 59-2026375 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent REIMER, R L Street Address (P.O. Box Number is Not Acceptable) **507-C HERBERT ST** PORT ORANGE, FL 32129 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. STD TITLE ☐ Detete TITLE ☐ Change ☐ Addition MANDELL, LOIS NAME NAME 2101 N ATLANTIC AVE, #10 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL CITY-ST-ZIP VPD □ Detete ☐ Change Addition TITLE TITLE GIAMBONA, LORETTA NAME NAME STREET ADDRESS 2101 N ATLANTIC AVE #9 STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32118 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition TITLE NAME MILLER, GARRY TJ MALE STREET ADDRESS 2101 N ATLANTIC AVENUE, #1 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH, FL 32118 Addition ☐ Change TITLE 2 Qelete TIT: F Daugherty, Athel 11335 S.E. 68th Ct ASHBURN, JAMES NAME NAME STREET ADDRESS 1720 N ATLANTIC AVE STREET ADDRESS Belleview, FL 34426 CITY-ST-7/P DAYTONA BEACH, FL 32118 CITY-ST-7IF ☐ Change ☐ Addition TITLE ☐ Delete TITLE MARTIN, FRANCINE NAME NAME STREET ADDRESS 2101 N ATLANTIC AVE #26 STREET ADDRESS DAYTONA BEACH, FL 32118 CITY-ST-70 CITY-ST-78P TITLE ☐ Oelete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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

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