

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 750231

FILED
Oct 05, 2006
Secretary of State

Entity Name: OCEAN RESIDENCE NORTH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

263 OCEAN RESIDENCE NORTH
SATELLITE BEACH, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

263 OCEAN RESIDENCE CT
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 59-0243516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEMPS, SCOTT A
263 OCEAN RESIDENCE CT
SATELLITE BEACH, FL 32937 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: SCOTT KEMPS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: KEMPS, SCOTT M
Address: 263 OCEAN RESIDENCE CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: PD () Delete
Name: MOES, DON
Address: 257 OCEAN RESIDENCE COURT
City-St-Zip: SATELLITE BCH, FL 32937

Title: SD () Delete
Name: CROWE, KEN
Address: 255 OCEAN RESIDENCE CT
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: GLEN, CLINTON
Address: 259 OCEAN RESIDENCE COURT
City-St-Zip: SATELLITE BCH, FL 32937

Title: PD (X) Change () Addition
Name: CROWE, KEN
Address: 255 OCEAN RESIDENCE CT
City-St-Zip: SATELLITE BEACH, FL 32937

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT KEMPS

T

10/05/2006

Electronic Signature of Signing Officer or Director

Date