2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751096

FILED Mar 12, 2009 Secretary of State

Entity Name: OCEAN PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 6450 COLLINS AVENUE MIAMI BEACH, FL 33141 **Current Mailing Address: New Mailing Address:** 6450 COLLINS AVENUE MIAMI BEACH, FL 33141 FEI Number: 59-2029037 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: REHR, MICHAEL E 9500 SOUTH DADELAND BOULEVARD **SUITE #550** MIAMI, FL 33156 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GAMEZ, JORGE Name: Name: 6450 COLLINS AVE. #1109 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: ABRAMSON, DIANE Name: ESQUIVEL, JORGE Address: 6450 COLLINS AVE #202 Address: 6450 COLLINS AVE #1201 City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33141 Title: () Delete Title: () Change () Addition ZARATE, NESTOR Name: Name: 6450 COLLINS AVE #407 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BARCIA, TERESA Name: 6450 COLLINS AVE #1202 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: () Delete Title: (X) Change () Addition ESQUIVEL, JORGE MCDONALD, BARBARA Name: Name: 6450 COLLINS AVE #1201 6450 COLLINS AVE #1403 Address: Address: City-St-Zip: MIAMI BCH, FL 33141 City-St-Zip: MIAMI BCH, FL 33141 Title: () Delete Title: () Change () Addition RIVERO, MARTIN Name: Name: Address: 6450 COLLINS AVE #703 Address: MIAMI BEACH, FL 33141 City-St-Zip: 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: TERESA BARCIA S-D 03/12/2009