2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751475

FILED Apr 08, 2009 Secretary of State

Entity Name: OCEAN LANDINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 900 NORTH ATLANTIC AVENUE COCOA BEACH, FL 32931 **Current Mailing Address: New Mailing Address:** 900 NORTH ATLANTIC AVENUE COCOA BEACH, FL 32931 FEI Number: 59-1990847 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: GREENFIELD, HARRY 800 E. MERRITT ISLAND CAUSEWAY SUITE 202 MERRITT ISLAND, FL 32952 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 GERHARDT, RICHARD Name: Name: 830 N ATLANTIS AVE APT 1407-B Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: Title: TD Title: () Delete () Change () Addition RIVERA, FELIX Name: Name: Address: 5201 JADE CIR Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: VPD () Delete Title: () Change () Addition LAMY, JOSEPH H. Name: Name: 416 S BANANA RIVER BLVD Address: Address: City-St-Zip: COCOA BEACH, FL City-St-Zip: Title: SD () Delete Title: () Change () Addition GAINES, JAMES Name: Name: 17 ESCONDIDO CIR. UNIT 237 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: Title: AVP () Delete Title: (X) Change () Addition TAKACS, JOSEPH A Name: Name: TAKACS, JOSEPH A 3815 RIVER CROSSING PARKWAY, STE 20 3815 RIVER CROSSING PARKWAY, STE 20 Address: Address: City-St-Zip: INDIANAPOLIS, IN 45240 City-St-Zip: INDIANAPOLIS, IN 45240 Title: () Delete Title: () Change () Addition TRULL. DESIREE Name: Name: Address: 435 GRANT AVE Address: SATELLITE BEACH, FL 32937 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: RICHARD GERHARDT PD 04/08/2009