

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752862

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** OCEAN SHORES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1510 OCEAN SHORE BLVD.  
ORMOND BCH, FL 32176

**New Principal Place of Business:**

**Current Mailing Address:**

%ATLANTIC COMM ASSOC MGMT & ACCTNG INC  
507-C HERBERT ST  
PORT ORANGE, FL 32129 US

**New Mailing Address:**

FEI Number: 59-2513253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YACEK, RENNY M  
507-C HERBERT ST  
PORT ORANGE, FL 32129 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KNETGE, WILLIAM  
Address: 3501 LONE WOLF TRAIL  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VPD  
Name: POMERENKE, BERYL  
Address: 1510 OCEAN SHORE BLVD, # 415  
City-St-Zip: ORMOND BEACH, FL 32176

Title: STD  
Name: KIMBROUGH, TEDDY  
Address: 1510 OCEAN SHORE BLVD #402  
City-St-Zip: ORMOND BEACH, FL 32176

Title: D  
Name: KNETGE, BARBARA  
Address: 3501 LONE WOLF TRAIL  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: D  
Name: KIMBROUGH, BEVERLY  
Address: 1510 OCEAN SHORE BLVD #402  
City-St-Zip: ORMOND BEACH, FL 32176

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM KNETGE

PD

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date