

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752922

FILED
Jan 18, 2007
Secretary of State

Entity Name: OCEANSIDE PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

211 CAROLINE STREET
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

211 CAROLINE STREET
OFFICE
CAPE CANAVERAL, FL 32920 US

Current Mailing Address:

211 CAROLINE STREET
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

211 CAROLINE STREET
OFFICE
CAPE CANAVERAL, FL 32920 US

FEI Number: 59-1649630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, JEFFERY W
3201 N ATLANTIC AVE
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

WELLS, JEFFERY W
211 CAROLINE STREET
OFFICE
CAPE CANAVERAL, FL 32920 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: JEFFERY W WELLS

01/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVTs () Delete
Name: WELLS, JEFFERY W
Address: 3201 N ATLANTIC AVE
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTs (X) Change () Addition
Name: WELLS, JEFFERY W
Address: 211 CAROLINE STREET OFFICE
City-St-Zip: CAPE CANAVERAL, FL 32920

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: JEFFERY W WELLS

PVTs

01/18/2007

Electronic Signature of Signing Officer or Director

Date