2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#755000

FILED Mar 08, 2006 Secretary of State

Entity Name: OCEAN SANDS NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

INDIALANTIC, FL 32903

Current Mailing Address: New Mailing Address:

2727 A1A

INDIALANTIC, FL 32903

FEI Number: 59-2566217 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:

SHORT, LLOYD A MEYER, JENS U 2727 N A1A # 102 2727 N A1A # 501

INDIALANTIC, FL 32903 INDIALANTIC, FL 32903 US 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: JENS U MEYER 03/08/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

SHORT, LLOYD A MEYER, JENS U Name: Name: 2727 HWY A1A # 102 Address: 2727 HWY A1A # 501 Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete Title: (X) Change () Addition HERMAN, JAMES Name: BROWN, MARTIN Name:

Address: 698 RENOLDA WOODS CT Address: 2727 N HWY A1A #401 City-St-Zip: KETTERING, OH 45429 City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete Title: (X) Change () Addition

COLEMAN, YVONNE COLEMAN, YVONNE Name: Name: 2727 HWY A1A # 504 2727 HWY A1A # 504 Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

Title: BDM () Delete Title: (X) Change () Addition Name: RADPOUR, SHOKRI Name: PONCE, ED

6909 HARBOUR WOOD 01K 2727 N HWY A1A # 505 Address: Address:

City-St-Zip: NOBLESVILLE, IN 46062 City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete (X) Change () Addition JAMES, MARK KAPUSCINCKI, H Name: Name: 2727 HWY A1A, # 105 2727 HWY A1A, # 103 Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

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.

Title:

SIGNATURE: JENS U MEYER Т 03/08/2006