## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#755000** 

FILED Apr 30, 2008 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

SUITE 106

ROCKLEDGE, FL 32955

1978 ROCKLEDGE BLVD.

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 2727 NÓ HWY A1A ADVANCED PROPERTY MANAGEMENT ROCKLEDGE BLVD.

INDIALANTIC, FL 32903 US

SUITE 106

ROCKLEDGE, FL 32955 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: VAN C. MOORE 04/30/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition SHORT, LLOYD SHORT, LLOYD Name: Name:

2727 NO HWY A1A Address: 2727 NO HWY A1A # 102 Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

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

BROWN, MARTIN Name: BROWN, MARTIN Name: Address: 2727 N HWY A1A #401 Address: 2727 N HWY A1A #401 City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

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

WATERSON, JACK RADPOUR, SHOKRI Name: Name: 2727 NO HWY A1A 2727 NO HWY A1A # 301 Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

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

Name: BELL, EDWARD G Name: Address: 2727 NO HWY A1A Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip:

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

PONCE, ED Name: Name: 2727 NO HWY A1A Address: Address: City-St-Zip: INDIALANTIC, FL 32903 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: VAN C. MOORE RΑ 04/30/2008