## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#755000** 

FILED Feb 13, 2009 Secretary of State

Entity Name: OCEAN SANDS NORTH CONDOMINIUM ASSOCIATION, INC.

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

2727 A1A

INDIALANTIC, FL 32903

Current Mailing Address: New Mailing Address:

1978 ROCKLEDGE BLVD. SUITE 106 ROCKLEDGE, FL 32955

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:

ADVANCED PROPERTY MANAGEMENT ROCKLEDGE BLVD. 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:

City-St-Zip:

· \_\_\_\_\_

Name:

Title:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

(X) Change ( ) Addition

 Title:
 TD
 ( ) Delete

 Name:
 SHORT, LLOYD

 Address:
 2727 NO HWY A1A # 102

 City-St-Zip:
 INDIALANTIC, FL 32903

Title: SD () Delete
Name: BROWN, MARTIN

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

 Title:
 PD
 ( ) Delete

 Name:
 RADPOUR, SHOKRI

 Address:
 2727 NO HWY A1A # 301

INDIALANTIC, FL 32903

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

PD

MEYER, UWE

2727 NO HWY A1A # 501

INDIALANTIC, FL 32903

Title: SD (X) Change ( ) Addition

Name: VASQUEZ, KIMBA
Address: 2727 NO HWY A1A # 601
City-St-Zip: INDIALANTIC, FL 32903

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 MOORE RA 02/13/2009