

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759137

FILED
Jan 14, 2009
Secretary of State

Entity Name: OCEAN SUNRISE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

20 DONDANVILLE ROAD
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

20 DONDANVILLE ROAD
ST. AUGUSTINE, FL 32080 US

Current Mailing Address:

3942 A1A SOUTH
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-2236199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIGOOD, JUDY S
3942 A1A SOUTH
ST. AUGUSTINE, FL 32080 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: D () Delete
Name: HARRISON, RON
Address: P O BOX 328
City-St-Zip: TAVARES, FL 32778

Title: T () Delete
Name: BONNOT, BROOKS
Address: 3770 HADDON HALL RD NW
City-St-Zip: ATLANTA, GA 30327

Title: V () Delete
Name: HATHORN, FRED
Address: 20 DONDANVILLE UNIT 203
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P () Delete
Name: HEALD, GEORGE
Address: 4020 RIVER CLIFF CHASE
City-St-Zip: MARIETTA, GA 30067

Title: D () Delete
Name: SANDRA, STORMANT
Address: 20 DONDANVILLE RD #604
City-St-Zip: SAINT AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMS, MACK
Address: 4107 SW 96TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: D (X) Change () Addition
Name: MORGAN, DAN
Address: 1288 ALABAMA DRIVE
City-St-Zip: WINTERPARK, FL 32789 US

Title: V/T (X) Change () Addition
Name: HATHORN, FRED
Address: 20 DONDANVILLE UNIT 203
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

Title: D (X) Change () Addition
Name: HOOKS, MARIANN
Address: 20 DONDANVILLE ROAD 401
City-St-Zip: ST AUGUSTINE, FL 32080 US

Title: P (X) Change () Addition
Name: SANDRA, STORMANT
Address: 20 DONDANVILLE RD #604
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

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: JUDY ALLIGOOD

RA

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date