2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# 759859

Entity Name: GALT OCEAN MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4040 GALT OCEAN DRIVE
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

4040 GALT OCEAN DRIVE
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 36-3202079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROCHLIN, DEBRA P P.A.
900 S. ANDREWS AVE.
FORT LAUDERDALE, FL 33316 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/T ( ) Delete
Name: CHIN, CAROLYN
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP/D ( ) Delete
Name: CAICO, CHARLES
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: TOSELLI, SHELLEY
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P/D ( ) Delete
Name: TALERICO, FRANK
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: TALERICO, RITA
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/T (X) Change ( ) Addition
Name: SNYDER, MICHAEL
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S/D (X) Change ( ) Addition
Name: COVEN, DAVID
Address: 4040 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: FRANK TALERICO P/D 04/28/2009

Electronic Signature of Signing Officer or Director — Date