2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 13, 2006 8:00 am Secretary of State **DOCUMENT # 760118** 04-13-2006 90286 043 ****61.25 1. Entity Name OCEAN HOUSE CONDOMINIUM, INC. Principal Place of Business Mailing Address 2220 OCEAN SHORE BL 2220 OCEAN SHORE BL ORMOND BEACH FL 32176 ORMOND BEACH FL 32176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2380769 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BOWMAN, LENOISE** Street Address (P.O. Box Number is Not Acceptable) 2220 OCEAN SHORE BL 401-A ORMOND BEÄCH FL 32176 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61,25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Charles Peloguin Da TITLE TITLE T' D ☐ Change ☐ Delete Addition GOLDTRAP, GEORGE JR. NAME NAME STREET ADDRESS 2222 OCEANSHORE BLVD #103B STREET ADDRESS ormand Black, FL 32176 ORMOND BEACH FL 32176 City St-7IP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition KRAMER, SUSAN NAME NAME 4472 WILLOW WIND CT STREET ADDRESS STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ■ Addition DORR, JOE STREET ADDRESS 2220 OCEAN SHORE BLVD., 506-P STREET ADDRESS CITY-ST-7IP ORMOND BEACH FL 32176 CITY-ST-ZIP VP מו ☐ Delete TITLE TITLE Change T Addition WITT, JIM NAME NAME STREET ADDRESS 9210 SPYGLASS CT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32258 CITY-ST-ZIP TITLE ☐ Delete TIT! F sec. A Change Addition STANLEY, CAROL NAME NAME 2222 OCEAN SH BL. #505-B STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32176 CITY-ST-ZIP CITY-ST-7IP ח TITLE ☐ Delete TITLE ☐ Change ☐ Addition SPINKS, JOE NAME NAME 2222 OCEAN SHORE BLVD., 504-A STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

CITY-ST-ZIP

ORMOND BEACH FL 32176

Dir. Treesurer

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