

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762073

FILED  
Feb 27, 2012  
Secretary of State

**Entity Name:** OCEAN PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

120 SOUTH OCEAN BLVD.  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

120 SOUTH OCEAN BLVD.  
APT #F-1  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 59-2237222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BATES, LINDA I  
120 SOUTH OCEAN BLVD  
APT. E-1  
DELRAY BEACH, FL 33483 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: SD  
Name: MARIANI, SHERRI  
Address: 120 SO OCEAN BLVD #D-5  
City-St-Zip: DELRAY BCH, FL 33483

Title: PD  
Name: BATES, LINDA I  
Address: 120 S OCEAN BLVD #E-1  
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD  
Name: CORSO, STEVE  
Address: 120 SOUTH OCEAN BLVD D-3  
City-St-Zip: DELRAY BCH, FL 33483

Title: D  
Name: DOODY, MICHAEL  
Address: 120 SO OCEAN BLVD #E-3  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D  
Name: VALENTI, JILL  
Address: 120 S OCEAN, # A-1  
City-St-Zip: DELRAY BEACH, FL 33483

Title: DVP  
Name: MCCLONE, MICHAEL  
Address: 120 SOUTH OCEAN BLVD D-2  
City-St-Zip: DELRAY BEACH, FL 33483

I hereby 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 all other like empowered.

SIGNATURE: LINDA BATES

PD

02/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date