2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765200

FILED Mar 11, 2005 Secretary of State

Entity Name: LA COSTA OCEAN & BATH CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
3100 S. A1 MELBOUR	A RNE, FL 32951	US			
Current Mailing Address:		New Mailir	New Mailing Address:		
P O BOX 5 MELBOUR	510591 RNE, FL 32951	US			
FEI Number:	59-2142401	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
	NY BROOK LN	NE E107 JS			
	named entity รเ e of Florida.	bmits this statement for the pu	irpose of changing it	s registered office or registered agent, or both,	
SIGNATUF	> ⊏-				
SIGIVATOR	₹⊑.				
SIGNATOR		Signature of Registered Ager	nt	Date	
				Date S/CHANGES TO OFFICERS AND DIRECTORS:	
OFFICERS Title: Name: Address:	Electronic	ORS: Delete ALD TREET 607			
	Electronic S AND DIRECT D () [DONOHUE, DON 111 LACOSTA S' MELBOURNE BE	ORS: Delete ALD TREET 607 ACH, FL 32951 Delete	ADDITION Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTORS:	
OFFICER: Title: vame: Address: City-St-Zip: Title: vame: Address:	Electronic S AND DIRECT D () E DONOHUE, DON 111 LACOSTA S' MELBOURNE BE SDTD () E STAFFORD, ED 101 LACOSTA S' MELBOURNE BE	ORS: Delete ALD TREET 607 ACH, FL 32951 Delete TREET B1 ACH, FL 32951	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition	
DFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Name: Address:	Electronic S AND DIRECT D () E DONOHUE, DON 111 LACOSTA S' MELBOURNE BE SDTD () E STAFFORD, ED 101 LACOSTA S' MELBOURNE BE D () E ELLMAN, JERRY 109 LACOASTA S' MELBOURNE BE	ORS: Delete ALD TREET 607 ACH, FL 32951 Delete TREET B1 ACH, FL 32951 Delete STREET B1 ACH, FL 32951	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	S/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Change () Addition D (X) Change () Addition SIGMUND, BEINER 103 LACOASTA STREET A6	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RALPH ROWELL PD 03/11/2005