2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765272

FILED Jan 17, 2008 Secretary of State

Entity Name: OCEAN CLUB I CONDOMINIUM ASSOC., INC. OF ST. AUGUSTINE BEACH

	rincipal Place of Business:	New Principal Place of Business:	
	ANVILLE RD.		
JNIT 3 SAINT AU	IGUSTINE, FL 32080		
Current Mailing Address:		New Mailing Address:	
	ANVILLE RD.		
JNIT 3 SAINT AU	IGUSTINE, FL 32080		
El Number	: 59-2256951 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:	
	A, CAROLYNE TREAS ANVILLE RD		
	JSTINE, FL 32080 US		
	e named entity submits this statement for the pu e of Florida.	urpose of changing its registered office or registered agent, or both,	
SIGNATU		<u> </u>	
	Electronic Signature of Registered Ager		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Fitle: Name: Nddress: Dity-St-Zip:	VP () Delete ROBERT, HARRISON VP 11 DONDANVILLE RD #30 ST. AUGUSTINE, FL 32080 US	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: Dity-St-Zip:	SECY () Delete WILLIAM, WALLACE SEC'Y 1288 DANIELLE DR. SMYRNA, GA 30080 US	Title: SECY (X) Change () Addition Name: CHARLES, GUNDERSON SEC'Y Address: 11 DONDANVILLE RD. #38 City-St-Zip: ST. AUGUSTINE, FL 30080 US	
「itle: √ame: √ddress:	PRES () Delete JOHANSSON, SIEVERT PRES 11 DONDANVILLE RD #36 ST. AUGUSTINE, FL 32080 US	Title: () Change () Addition Name: Address: City-St-Zip:	
City-St-Zip:			
City-St-Zip: Fitle: Name: Address: City-St-Zip:	T () Delete ESTRADA, CAROLYNE TREAS 11 DONDANVILLE RD #12 ST. AUGUSTINE, FL 32080 US	Title: () Change () Addition Name: Address: City-St-Zip:	
itle: lame: \ddress:	ESTRADA, CAROLYNE TREAS 11 DONDANVILLE RD #12	Name: Address:	

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: ROBERT HARRISON VP 01/17/2008